Doc 1 Filed 04/15/19 Entered 04/15/19 21:46:21 Case 8:19-bk-11384-TA Main Document Page 1 of 59 Fill in this information to identify your case: United States Bankruptcy Court for the: Central District of California Chapter you are filing under: Case number (If known):_ A Chapter 7 Chapter 11 Chapter 12 Check if this is an Chapter 13

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

amended filing

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint* case—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be *yes* if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pai | Part 1: Identify Yourself | | | | | |
|-----|--|--|---|--|--|--|
| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): | | | |
| 1. | Your full name | | | | | |
| | Write the name that is on your government-issued picture identification (for example, your | Dominic First name | First name | | | |
| | driver's license or passport). Bring your picture identification to | Middle name | Middle name | | | |
| | | Caruso | | | | |
| | your meeting with the trustee. | Last name | Last name | | | |
| | | Suffix (Sr., Jr, II, III) | Suffix (Sr., Jr, II, III) | | | |
| 2. | All other names you have used in the last 8 years | | | | | |
| | 10.23 | First name | First name | | | |
| | Include your married or maiden names. | Middle name | Middle name | | | |
| | | Last name | Last name | | | |
| | | First name | First name | | | |
| | | Middle name | Middle name | | | |
| | | Last name | Last name | | | |
| | | TO LINE TO THE STATE OF T | | | | |
| 3. | Only the last 4 digits of your | xxx-xx- <u>0</u> <u>0</u> <u>7</u> <u>5</u> | xxx-xx | | | |
| | Social Security number or federal Individual Taxpayer | OR | OR | | | |
| | Identification number (ITIN) | 9xx-xx | 9xx-xx | | | |

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Debtor 1 **Dominic** Caruso Case number (if known) First Name Middle Name Last Name **About Debtor 1:** About Debtor 2 (Spouse Only in a Joint Case): Any business names and Employer Identification ✓ I have not used any business names or EINs. I have not used any business names or EINs. Numbers (EIN) you have used in the last 8 years **Business** name Business name Include trade names and doing business as names Business name Business name EIN EIN EIN EIN If Debtor 2 lives at a different address: Where you live 18771 Flagstaff Lane Number Street **Huntington Beach, CA 92646** ZIP Code State **ZIP Code** Orange County County If your mailing address is different from the one above, fill If Debtor 2's mailing address is different from the one above, fill it in here. Note that the court will send any notices it in here. Note that the court will send any notices to you at this mailing address. to you at this mailing address. Number Number Street P.O. Box P.O. Box City ZIP Code State ZIP Code City State Why you are choosing this Check one: district to file for bankruptcy Over the last 180 days before filing this petition, I have Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. lived in this district longer than in any other district. I have another reason. Explain. I have another reason. Explain. (See 28 U.S.C. § 1408) (See 28 U.S.C. § 1408)

Debtor 1

| Dominic | | Caruso Caruso | Case number (if known) | |
|------------|-------------|---------------|------------------------|--|
| First Name | Middle Name | Last Name | | |

| Pai | rt 2: Tell the Court About Yo | ur Bank | ruptcy Case | | | |
|-----|---|---------------------------------------|---|---|--|--|
| 7. | The chapter of the Bankruptcy Code you are choosing to file under | | | ion of each, see <i>Notice Require</i> op of page 1 and check the appi | | 342(b) for Individuals Filing for Bankruptcy |
| 8. | How you will pay the fee | aboo orde a pr | at how you may pay. Typ your attorney is sub- e-printed address. ed to pay the fee in inse your Filing Fee in Installme yourst that my fee be we so not required to, waive applies to your family si | ically, if you are paying the fee yomitting your payment on your be stallments. If you choose this opents (Official Form 103A). aived (You may request this opting your fee, and may do so only if your fee, and you are unable to pay the | ourself, you may pothalf, your attorney tion, sign and attaction on only if you are your income is lessele fee in installment | office in your local court for more details ay with cash, cashier's check, or money may pay with a credit card or check with the Application for Individuals to Pay filing for Chapter 7. By law, a judge may, s than 150% of the official poverty line ts). If you choose this option, you must fill 03B) and file it with your petition. |
| 9. | Have you filed for bankruptcy within the last 8 years? | ☑No. □Yes. | District | When | MM / DD / YYYY | Case number |
| | | | District | When | | Case number |
| | | | | | MM / DD / YYYY | |
| | | | District | When | MM / DD / YYYY | Case number |
| 10. | Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | ∑ Í No. □Yes. | Debtor | When MN | 1/DD/YYYY | Relationship to you |
| | | | Debtor | | | Relationship to you |
| | | | District | When | I/DD/YYYY | Case number, if known |
| 11. | Do you rent your residence? | ✓ No.☐ Yes | Has your landlord obt | | - | Cou (Form 101A) and file it as part |
| | | | of this bankruptcy | | | |

Case 8:19-bk-11384-TA Doc 1 Filed 04/15/19 Entered 04/15/19 21:46:21 Main Document Page 4 of 59 Debtor 1 **Dominic** Caruso Case number (if known). First Name Middle Name Last Name Part 3: Report About Any Businesses You Own as a Sole Proprietor No. Go to Part 4. 12. Are you a sole proprietor of any Yes. Name and location of business full- or part-time business? A sole proprietorship is a business you operate as an individual, and is Name of business, if any not a separate legal entity such as a corporation, partnership, or LLC. Number Street If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. City **ZIP Code** State Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate 13. Are you filing under Chapter 11 deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of of the Bankruptcy Code and are operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in you a small business debtor? 11 U.S.C. § 1116(1)(B). For a definition of small business ☑ No. I am not filing under Chapter 11. debtor, see 11 U.S.C. § 101(51D). ☐ No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code. Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention Q 14. Do you own or have any

14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?

For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

| | Number | Street | |
|------------------------|----------------|---------------|-------------|
| Where is the property | ? | | |
| If immediate attention | is needed, why | is it needed? | |
| | | | |
| What is the hazard? | | | |
| | | | |

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Debtor 1

Dominic

First Name

Middle Name

Last Name

Case number (if known)

Explain Your Efforts to Receive a Briefing About Credit Counseling 15. Tell the court whether you **About Debtor 1:** About Debtor 2 (Spouse Only in a Joint Case): have received a briefing about credit counseling. The law requires that you You plust check one: You must check one: receive a briefing about credit I received a briefing from an approved credit counseling I received a briefing from an approved credit counseling counseling before you file for agency within the 180 before I filed this bankruptcy petition, agency within the 180 before I filed this bankruptcy petition, bankruptcy. You must truthfully and I received a certificate of completion. and I received a certificate of completion. check one of the following choices. If you cannot do so, you Attach a copy of the certificate and the payment plan, if Attach a copy of the certificate and the payment plan, if are not eligible to file. any, that you developed with the agency. any, that you developed with the agency. I received a briefing from an approved credit counseling I received a briefing from an approved credit counseling If you file anyway, the court can agency within the 180 days before I filed this bankruptcy agency within the 180 days before I filed this bankruptcy dismiss your case, you will lose petition, but I do not have a certificate of completion. petition, but I do not have a certificate of completion. whatever filing fee you paid, and your creditors can begin Within 14 days after you file this bankruptcy petition, you Within 14 days after you file this bankruptcy petition, you collection activities again. MUST file a copy of the certificate and payment plan, if MUST file a copy of the certificate and payment plan, if I certify that I asked for credit counseling services from an I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the circumstances merit a 30-day temporary waiver of the requirement. requirement. To ask for a 30-day temporary waiver of the requirement, To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent before you filed for bankruptcy, and what exigent circumstances required you to file this case circumstances required you to file this case. Your case may be dismissed if the court is dissatisfied Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you with your reasons for not receiving a briefing before you filed for bankruptcy. filed for bankruptcy. If the court is satisfied with your reasons, you must still If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. receive a briefing within 30 days after you file. You must file a certificate from the approved agency, You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed. any. If you do not do so, your case may be dismissed. Any extension of the 30-day deadline is granted only for Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. cause and is limited to a maximum of 15 days. I am not required to receive a briefing about credit I am not required to receive a briefing about credit counseling because of: counseling because of: Incapacity. I have a mental illness or a mental Incapacity. I have a mental illness or a mental deficiency that makes me incapable deficiency that makes me incapable of realizing or making rational of realizing or making rational decisions about finances. decisions about finances. ☐ Disability. ☐ Disability. My physical disability causes me to My physical disability causes me to be unable to participate in a briefing be unable to participate in a briefing in person, by phone, or through the in person, by phone, or through the internet, even after I reasonably tried internet, even after I reasonably tried to do so. to do so Active duty. I am currently on active military duty in Active duty. I am currently on active military duty in a military combat zone. a military combat zone. If you believe you are not required to receive a briefing If you believe you are not required to receive a briefing

about credit counseling, you must file a motion for waiver

of credit counseling with the court.

about credit counseling, you must file a motion for waiver

of credit counseling with the court.

Case 8:19-bk-11384-TA Entered 04/15/19 21:46:21 Doc 1 Filed 04/15/19 Main Document Page 6 of 59 Debtor 1 Dominic Case number (if known) First Name Middle Name Last Name Answer These Questions for Reporting Purposes 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by 16. What kind of debts do you an individual primarily for a personal, family, or household purpose." have? No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts. 17. Are you filing under Chapter 7? No. I am not filing under Chapter 7. Go to line 18. Do you estimate that after any Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative exempt property is excluded expenses are paid that funds will be available to distribute to unsecured creditors? and administrative expenses are paid that funds will be V No available for distribution to ☐ Yes unsecured creditors? 1-49 🔲 50-99 1,000-5,000 5,001-10,000 25,001-50,000 50,000-100,000 18. How many creditors do you 100-199 200-999 10,001-25,000 More than 100,000 estimate that you owe? \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 19. How much do you estimate \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion your assets to be worth? \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion \$0-\$50.000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 20. How much do you estimate \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion your liabilities to be? \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion Sign Below I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. For you If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Official Form 101

Dominic Caruso, Debtor 1 Executed on 04/15/2019

MM/ DD/ YYYY

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Page 7 of 59 Main Document Debtor 1 **Dominic** Caruso Case number (if known) First Name Middle Name **Last Name** For your attorney, if you are I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed represented by one under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, If you are not represented by an in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules attorney, you do not need to file this filed with the petition is incorrect. page. Date 04/15/2019 Aneno Ventura Attman, Esq., Attorney MM / DD / YYYY Anerio Ventura Altman, Esq. Printed name Lake Forest Bankruptcy Firm name Po Box 515381 Number Street Lake Forest Bankruptcy Los Angeles 90051-6681 City State ZIP Code Contact phone (949) 218-2002 Email address avaesq@lakeforestbkoffice.com

> CA State

228445

Bar number

STATEMENT OF RELATED CASES INFORMATION REQUIRED BY LBR 1015-2 UNITED STATES BANKRUPTCY COURT, CENTRAL DISTRICT OF CALIFORNIA

1. A petition under the Bankruptcy Act of 1898 or the Bankruptcy Reform Act of 1978 has previously been filed by or against the debtor, his/her spouse, his or her current or former domestic partner, an atfiliate of the debtor, any copartnership or joint venture of which debtor is or formerly was a general or limited partner, or member, or any corporation of which the debtor is a director, officer, or person in control, as follows: (Set forth the complete number and title of each such of prior proceeding, date filed, nature thereof, the Bankruptcy Judge and count to whom assigned, whether still pending and, if not, the disposition thereof. If none, so indicate. Also, list any real property included in Schedule A that was filed with any such prior proceeding(s).)

8:10-bk-15528-TA Dominic Caruso and Stacey Lyrin Caruso Case type: bk Chapter: 7 Asset: No Vol: v Judge: Theodor Albert Date filed: 04/27/2010 Date of last filing: 10/25/2010 Debtor discharged: 10/07/2010 Joint debtor discharged: 10/07/2010 Date terminated: 10/25/2010. The real estate in that matter is the same as that in this matter.

2. (If petitioner is a partnership or joint venture) A petition under the Bankruptcy Act of 1898 or the Bankruptcy Reform Act of 1978 has previously been filled by or against the debtor or an affiliate of the debtor, or a general partner in the debtor, a relative of the general partner, general partner of, or person in control of the debtor, partnership in which the debtor is a general partner, general partner of the debtor, or person in control of the debtor as follows: (Set forth the complete number and title of each such prior proceeding, date filed, nature of the proceeding, the Bankruptcy Judge and court to whom assigned, whether still pending and, if not, the disposition thereof. If none, so indicate. Also, list any real property included in Schedule A that was filed with any such prior proceeding(s).)

None.

3. (If petitioner is a corporation) A petition under the Bankruptcy Act of 1898 or the Bankruptcy Reform Act of 1978 has previously been filed by or against the debtor, or any of its affiliates or subsidiaries, a director of the debtor, an officer of the debtor, a person in control of the debtor, a partnership in which the debtor is general partner, a general partner of the debtor, a relative of the general partner, director, officer, or person in control of the debtor, or any persons, firms or corporations owning 20% or more of its voting stock as follows: (Set forth the complete number and title of each such prior proceeding, date filed, nature of proceeding, the Bankruptcy Judge and court to whom assigned, whether still pending, and if not, the disposition thereof. If none, so indicate. Also, list any real property included in Schedule A that was filed with any such prior proceeding(s).)

None.

4. (If petitioner is an individual) A petition under the Bankruptcy Reform Act of 1978, including amendments thereof, has been filed by or against the debtor within the last 180 days: (Set forth the complete number and title of each such prior proceeding, date filed, nature of proceeding, the Bankruptcy Judge and court to whom assigned, whether still pending, and if not, the disposition thereof. If none, so indicate. Also, list any real property included in Schedule A that was filed with any such prior proceeding(s).)

None,

| I declare, under penalty of perjury, that the foregoing is true and correct. | |
|--|---------------------------|
| Executed at <u>Laguna Hills, CA</u> , California | Signature of Debtor |
| Date: 04/15/2019 | |
| | Signature of Joint Debtor |

| Fill in this information | to identify your case: | | | ed 04/15/1 59 | 9 21:46:21 |
|--------------------------|------------------------|-------------|-------------------------------|------------------|------------|
| Debtor 1 | Dominic | | Caruso | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | |
| United States Bankro | uptcy Court for the: | Ce | entral District of California | | |
| Case number (if known) | | | | | ☐ Che |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

| Part 1: Summarize Your Assets | |
|--|---|
| | Your assets Value of what you own |
| 1. Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B | \$946,700.00 \$20,000.00 \$966,700.00 |
| | Your liabilities Amount you owe |
| Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$891,567.00 |
| Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | \$0.00 |
| 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | + \$10,753.00 |
| Your total liabilities Part 3: Summarize Your Income and Expenses | \$902,320.00 |
| 4. Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I | \$2,500.00 |
| 5. Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J | \$7,324.00 |

Case Ric19-bk-11384-TA Doc Larus Filed 04/15/19 Entered 04/15/19 Entered 04/15/19 Entered 04/15/19 First Name Main Lagrage 10 of 59

| Part 4: Answer These Questions for Administrative and Statistical Records | | | | | | |
|---|-------------|--|--|--|--|--|
| 5. Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. Yes | | | | | | |
| What kind of debt do you have? ✓ Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159. ✓ Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. | | | | | | |
| From the Statement of Your Current Monthly Income. Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. \$2,500.00 | | | | | | |
| 9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F: | Total claim | | | | | |
| From Part 4 on Schedule E/F, copy the following: | | | | | | |
| 9a. Domestic support obligations (Copy line 6a.) | \$0.00 | | | | | |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$0.00 | | | | | |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$0.00 | | | | | |
| 9d. Student loans. (Copy line 6f.) | \$0.00 | | | | | |
| 9e.Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$0.00 | | | | | |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | +\$0.00 | | | | | |
| 9g. Total . Add lines 9a through 9f. | \$0.00 | | | | | |

| Fill in this information to | o identify your case and this filing | | red 04/15/19 21:46:2: | 1 Desc |
|--|--|---|--|---|
| Debtor 1 | Dominic | Caruso | 59 | |
| Debtor 2 (Spouse, if filing) | First Name Middle N First Name Middle N | Name Last Name | | |
| Case number | | Central District of California | | Check if this is an amended filing |
| Official Form Schedule A | 106A/B /B: Property | | | 12/15 |
| fits best. Be as completes space is needed, attach | te and accurate as possible. If to a separate sheet to this form. | st an asset only once. If an asset fits in more than on two married people are filing together, both are eq On the top of any additional pages, write your named g, Land, or Other Real Estate You Own o | ually responsible for supplying ne and case number (if known). <i>I</i> | correct information. If more |
| Do you own or hat No. Go to Part Yes. Where is t Single Fami Street address description 18771 Flags | ve any legal or equitable interes 2. he property? ily Home s, if available, or other | what is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one Debtor 1 only Debtor 2 only At least one of the debtors and another Other information you wish to add about this ite property identification number: | Do not deduct secured cla amount of any secured cla Creditors Who Have Clair Current value of the entire property? \$946,700.00 Describe the nature of you as fee simple, tenancy by estate), if known. Fee Simple Check if this is comme (see instructions) | Current value of the portion you own? \$946,700.00 ur ownership interest (such the entireties, or a life |

LOT 2 OF TRACT NO. 8332, IN THE CITY OF HUNTINGTON BEACH, COUNTY OF ORANGE, STATE OF CALIFORNIA, AS PER MAP RECORDED IN BOOK 367 PAGES 36 AND 37 OF MISCELLANEOUS

\$946,700.00

MAPS, IN THE OFFICE OF THE COUNTY RECORDER OF SAID COUNTY.

Source of Value: Redfin.com

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages

you have attached for Part 1. Write that number here....

☐ No ✓ Yes. Describe......

| Debtor 1 | Case Bi-19-I First Name | bk-11384-TA Middle Name | Main Dooumont Dogo 12 of E | 1 04/15/19 21:46:22 9 Case number (if known) | 1 Desc |
|-----------------------------|---|------------------------------------|--|---|---|
| Part 2: | Describe Your Veh | icles | | | |
| 3. Cars, v No Ye 3.1 M M | vans, trucks, tractors, so so lake: lodel: | If you lease a vehicle | in any vehicles, whether they are registered or not? It is, also report it on Schedule G: Executory Contracts and motorcycles Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another | Do not deduct secured cla amount of any secured cla Creditors Who Have Clair Current value of the entire property? | ms Secured by Property. Current value of the portion you own? |
| 0 | pproximate mileage: ther information: wn or have more than on | e list hare: | ☐ Check if this is community property (see instructions) | <u>unknown</u> | <u>unknown</u> |
| 3.2 M | | Forrester Subaru | Who has an interest in the property? Check one. ✓ Debtor 1 only Debtor 2 only | Do not deduct secured cla amount of any secured cla Creditors Who Have Clair | |
| A | ear: pproximate mileage: ther information: | <u>2004</u> <u>135000</u> | □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this is community property (see instructions) | Current value of the entire property? \$2,500.00 | Current value of the portion you own? \$2,500.00 |
| | <i>nple</i> s: Boats, trailers, mot lo | , | ner recreational vehicles, other vehicles, and accesso raft, fishing vessels, snowmobiles, motorcycle accessor | | |
| | • | - | all of your entries from Part 2, including any entries f here | . • | \$2,500.00 |
| Part 3: | Describe Your Pers | sonal and House | ehold Items | | |
| Do you o | own or have any legal or | r equitable interest i | n any of the following items? | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 6. House | ehold goods and furnis | shings , furniture, linens, chi | na, kitchenware | | |

\$650.00

Household goods and furnishings

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| _ | | |
|-----|---|------------|
| 7. | Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; | |
| | electronic devices including cell phones, cameras, media players, games | |
| | No Electronics Electronics | \$650.00 |
| | | |
| 8. | Collectibles of value | |
| | Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles | |
| | ✓ No | |
| | Yes. Describe | |
| | | |
| 9. | Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; | |
| | carpentry tools; musical instruments | |
| | No Equipment for sports and hobbies | \$650.00 |
| | Yes. Describe | |
| 10. | Firearms | |
| | Examples: Pistols, rifles, shotguns, ammunition, and related equipment | |
| | No 1 Firearm | \$400.00 |
| | Yes. Describe | |
| 11. | Clothes | |
| | Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories | |
| | No Clothes | \$650.00 |
| | Yes. Describe | |
| 12. | Jewelry | |
| | Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver | |
| | ☑ No | |
| | ☐ Yes. Describe | |
| | | |
| 13. | | |
| | Examples: Dogs, cats, birds, horses ✓ No | |
| | Yes. Describe | |
| | | |
| 14. | Any other personal and household items you did not already list, including any health aids you did not list | |
| | ☑ No | |
| | Yes. Describe | |
| 15 | Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached | |
| IJ. | for Part 3. Write that number here | \$3,000.00 |
| | | |

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| Par | t 4: Describe Your Fina | ncial Assets | | | |
|-------|---|--|-----------|----------------------------|---|
| | | equitable interest in any of the following? | | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 16. | ☑ No | in your wallet, in your home, in a safe deposit box, and on hand when you | | ur petition | |
| 17. | | gs, or other financial accounts; certificates of deposit; shares in credit us. If you have multiple accounts with the same institution, list each. | ınions, b | rokerage houses, and other | |
| | | Institution name: | | | |
| 17.1. | Checking account: | Chase | _ | unknown | |
| 17.2. | Checking account: | | _ | | |
| 17.3. | Savings account: | Chase | _ | unknown | |
| 17.4. | Savings account: | | _ | | |
| 17.5. | Certificates of deposit: | | _ | | |
| 17.6. | Other financial account: | | _ | | |
| | Other financial account: | | _ | | |
| | Other financial account: | | _ | | |
| 17.9. | Other financial account: Bonds, mutual funds, or pul | plicly traded stocks | _ | | |
| | Examples: Bond funds, inve | stment accounts with brokerage firms, money market accounts | | | |
| 19. | Non-publicly traded stock a an LLC, partnership, and jo | nd interests in incorporated and unincorporated businesses, includint venture | iding an | interest in | |
| | No Yes. Give specific information about them | | | | |
| Nam | e of entity: | % of ownership: | | | |

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| benefit No Yes. Give specific information about them Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements No Yes. Give specific information about them | Fur | unback Investments California Corporation Se | rvice Corporation 10 | 00 % | \$0.00 | |
|--|--------|---|---------------------------------------|------------------------|-------------------------------|---|
| All processible instruments include personal checks, cachiers' checks, promissory notes, and money orders. All no. Yes. Give specific information about them | | | | | | |
| Non-regolable instruments are those you cannot transfer to someone by signing or delivering them. No Yes. Give specific information about them | 20. | . Government and corporate bonds and other | negotiable and non-negotiabl | e instruments | | |
| Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans No | | | | | S. | |
| Information about them | | ☑ No | | | | |
| Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans No Yes_List each account separately | | information about | | | | |
| No Yes, List each account separately. | 21. | . Retirement or pension accounts | | | | |
| Yes. List each account separately. | | Examples: Interests in IRA, ERISA, Keogh, 40 | 1(k), 403(b), thrift savings accou | unts, or other pension | n or profit-sharing plans | |
| Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others No | | Yes. List each account | | | | |
| Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others No Yes | 22. | . Security deposits and prepayments | | | | |
| others No Yes | | Your share of all unused deposits you have made | so that you may continue service | e or use from a compa | any | |
| Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) No | | others | ent, public utilities (electric, gas, | water), telecommun | ications companies, or | |
| No Yes | | | | | | |
| Yes | 23. | . Annuities (A contract for a periodic payment of m | noney to you, either for life or for | a number of years) | | |
| 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). 1 No 1 Yes | | | | | | |
| 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). 1 No 1 Yes | 24. | . Interests in an education IRA, in an account in | n a qualified ABLE program, or | r under a qualified s | tate tuition program. | |
| Yes Institution name and description. Separately file the records of any interests. 11 U.S.C. § 521(c): Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit No | | | · - | • | | |
| nstitution name and description. Separately file the records of any interests. 11 U.S.C. § 521(c): Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit No Yes. Give specific information about them Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements No Yes. Give specific information about them Ticenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses | | ☑ No | | | | |
| Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit No | | ☐ Yes | | | | |
| benefit ✓ No Yes. Give specific information about them 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ✓ No Yes. Give specific information about them 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ✓ No Yes. Give specific | Instit | stitution name and description. Separately file the rec | cords of any interests. 11 U.S.C. | § 521(c): | | |
| □ Yes. Give specific information about them 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements 1 No 1 Yes. Give specific information about them 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses 1 No 1 Yes. Give specific | 25. | | y (other than anything listed in | line 1), and rights o | r powers exercisable for your | |
| □ Yes. Give specific information about them 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements 1 No 1 Yes. Give specific information about them 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses 1 No 1 Yes. Give specific | | √ No | | | | |
| 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ✓ No Yes. Give specific information about them 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ✓ No Yes. Give specific | | | | | | |
| Examples: Internet domain names, websites, proceeds from royalties and licensing agreements No Yes. Give specific information about them | | information about them | | | | |
| Examples: Internet domain names, websites, proceeds from royalties and licensing agreements No Yes. Give specific information about them | | | | | | |
| ✓ No Yes. Give specific information about them 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ✓ No Yes. Give specific | 26. | , 13 0 , , | · · · | • | | |
| Yes. Give specific information about them Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses No Yes. Give specific | | | roceeds from royalties and licen | ising agreements | | |
| Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ✓ No ✓ Yes. Give specific | | ☐ Yes. Give specific | | | | |
| Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ✓ No ✓ Yes. Give specific | | | | | | |
| professional licenses ☑ No ☐ Yes. Give specific | 27. | | | | | |
| Yes. Give specific | | professional licenses | s, cooperative association holdir | ngs, liquor licenses, | | |
| | | | | | | 1 |
| | | | | | | |

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| | First Name Middle i | name Treetin East Name To The | 1 ago 10 01 00 | |
|-----|---|--|---|---|
| | | | | |
| Mon | ey or property owed to you? | | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 28. | Tax refunds owed to you | | | |
| | Yes. Give specific information about them, including whether you already filed the returns and the tax years | 2018 500.00 | Federal: State: Local: | \$500.00 |
| 00 | | | | |
| 29. | Family support Examples: Past due or lump sum alimony, s 1 No | pousal support, child support, maintenar | nce, divorce settlement, property settlement | |
| | ☐ Yes. Give specific information | | Alimony: | |
| | | | Maintenance: | |
| | | | Support: | |
| | | | Divorce settlement: | |
| | | | Property settlement: | |
| | Security benefits; unpaid loans year No Yes. Give specific information | ou made to someone else | | |
| 31. | Interests in insurance policies Examples: Health, disability, or life insurance No Yes. Name the insurance company | e; health savings account (HSA); credit, | homeowner's, or renter's insurance | |
| | Yes. Name the insurance company of each policy and list its value | Company name: Mercury | Beneficiary: Third Party and the Debtors | Surrender or refund value: unknown |
| 32. | Any interest in property that is due you from If you are the beneficiary of a living trust, experience someone has died. No Yes. Give specific information | | or are currently entitled to receive property | |
| 33. | Claims against third parties, whether or no Examples: Accidents, employment disputes No | | mand for payment | |
| | Yes. Describe each claim | | | |

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Main Document Page 17 of 59 Case 8:19-bk-11384-TA Desc Debtor 1 Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims **✓** No ☐ Yes. Describe each claim..... 35. Any financial assets you did not already list ■ No ✓ Yes. Give specific information....... See Attached. \$14,000.00 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached \$14,500.00 for Part 4. Write that number here...... Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. Do you own or have any legal or equitable interest in any business-related property? ✓ No. Go to Part 6. Yes. Go to line 38. Current value of the portion you own? Do not deduct secured claims or exemptions. 38. Accounts receivable or commissions you already earned **√** No ☐ Yes. Describe...... 39. Office equipment, furnishings, and supplies

Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices

✓ No ☐ Yes. Describe......

40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade

Yes. Describe......

41. Inventory **√** No ☐ Yes. Describe......

42. Interests in partnerships or joint ventures

√ No Yes. Describe......

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First Name Middle Name Main Document Page 18 of 59 Desc Debtor 1 43. Customer lists, mailing lists, or other compilations Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))? **✓** No ☐ Yes. Describe...... 44. Any business-related property you did not already list **√** No Yes. Give specific information...... 45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached \$0.00 for Part 5. Write that number here..... Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? ✓ No. Go to Part 7. Yes. Go to line 47. Current value of the portion you own? Do not deduct secured claims or exemptions. 47. Farm animals Examples: Livestock, poultry, farm-raised fish **√** No ☐ Yes..... 48. Crops-either growing or harvested **√** No Yes. Give specific information..... 49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade **√** No ☐ Yes..... 50. Farm and fishing supplies, chemicals, and feed **√** No ☐ Yes.....

51. Any farm- and commercial fishing-related property you did not already list

√ No

Yes. Give specific information.....

| Debt | or 1 | Case 8:19- | -bk-11384-TA | Doc Larus | iled 04/15/19 |) Entered 04 | 1/15/19 21:46:21 Case number (if known) - | . Desc |
|---|--|--|---|-------------------|---------------------------------------|----------------------------|--|-----------------------------|
| 52. Par | for Part 6 | dollar value of all o 6. Write that numb | of your entries from Par ber here | rt 6, including a | ny entries for pages | you have attached | → | \$0.00 |
| 53. | Examples No Yes. 0 | | y of any kind you did no , country club membersh | _ | | | | |
| 54. | Add the d | dollar value of all | of your entries from Pa | art 7. Write that | number here | | → | \$0.00 |
| Dor | t Q. Liet | t the Totals of | Each Part of this | Form | | | | |
| Pai | t 0. LI3 | t the rotals of | Lacifrait of this | FOITH | | | | |
| 55. | | | e 2 | | | | → | \$946,700.00 |
| | Part 1: To | | e 2 | | \$2,500 | | → | \$946,700.00 |
| 55. | Part 1: To | otal real estate, line | e 2 | | | 00 | → | \$946,700.00 |
| 55. 56. | Part 1: To | otal real estate, line | e 25 household items, line 1 | | \$2,500 | <u>00</u> | → | \$946,700.00 |
| 55. 56. 57. | Part 1: To Part 2: To Part 3: To Part 4: To | otal real estate, line sotal vehicles, line sotal personal and | e 25 household items, line 1 | | \$2,500 \$3,000 \$14,500 | <u>00</u> | → | \$946,700.00 |
| 55.56.57.58.59. | Part 1: To Part 2: To Part 3: To Part 4: To Part 5: To | otal real estate, line sotal vehicles, line sotal personal and otal financial asset | e 25 household items, line 1 ts, line 36 | 15 | \$2,500 \$3,000 \$14,500 \$0 | 00 00 00 | → | \$946,700.00 |
| 55.56.57.58.59. | Part 1: To Part 2: To Part 3: To Part 4: To Part 5: To Part 6: To | otal real estate, line sotal vehicles, line sotal personal and otal financial assetotal business-related the form- and fish | e 2 5 household items, line 1 ts, line 36 ted property, line 45 | 15 | \$2,500 \$3,000 \$14,500 \$0 | 00 00 00 | → | \$946,700.00 |
| 55.56.57.58.59.60. | Part 1: To Part 2: To Part 3: To Part 4: To Part 5: To Part 6: To Part 7: To | otal real estate, line sotal vehicles, line sotal personal and otal financial asset otal business-related that farm- and fishotal other property | e 2 5 household items, line 1 ts, line 36 ted property, line 45 ning-related property, lin | ne 52 | \$2,500 \$3,000 \$14,500 \$0 | 00 00 00 00 00 | m→ | \$946,700.00 \$20,000.00 |

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Dominic First Name Middle Name Last Name

Debtor 1

SCHEDULE A/B: PROPERTY

Continuation Page

| 35. | Any financial assets you did not already list | | |
|-----|---|---|-------------|
| | Potential Return on Listing | _ | \$14,000.00 |
| | BRE License #01347643 | _ | \$0.00 |

Official Form 106A/B

Schedule A/B: Property

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| n this information t | o identify your case: | | | | |
|------------------------|-----------------------|-------------|-------------------------------|--|--|
| Debtor 1 | Dominic | | Caruso | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | |
| United States Bankru | ptcy Court for the: | Ce | entral District of California | | |
| Case number (if known) | | | | | |

Official Form 106C

Schedule C: The Property You Claim as Exempt

04/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| Part 1: Identify the Property You Claim as | Exempt | | |
|--|--|--|------------------------------------|
| Which set of exemptions are you claiming? Chee You are claiming state and federal nonbankruptor You are claiming federal exemptions. 11 U.S.C. For any property you list on Schedule A/B that you | ry exemptions. 11 U.S.C. § 9 \$522(b)(2) | 522(b)(3) | |
| Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | Amount of the exemption you claim | Specific laws that allow exemption |
| | Copy the value from Schedule A/B | Check only one box for each exemption. | |
| Brief description: Single Family Home 18771 Flagstaff Lane Huntington Beach, CA 92646 Line from Schedule A/B: 1.1 | \$946,700.00 | \$16,325.00 100% of fair market value, up to any applicable statutory limit | C.C.P. § 703.140(b)(5) |
| Brief description: 2007 GX Lexus 470 Line from | unknown | ✓ unknown 100% of fair market value, up to any applicable statutory limit | C.C.P. § 703.140(b)(2) |
| 3. Are you claiming a homestead exemption of more (Subject to adjustment on 4/01/22 and every 3 years ✓ No ☐ Yes. Did you acquire the property covered by the ☐ No ☐ Yes | s after that for cases filed on | or after the date of adjustment.) | |

Part 2:

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Additional Page

| Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | Amount of the exemption you claim | Specific laws that allow exemption |
|---|--------------------------------------|---|------------------------------------|
| | Copy the value from Schedule A/B | Check only one box for each exemption. | |
| Brief description: 2004 Forrester Subaru | \$2,500.00 | \$2,500.00 100% of fair market value, up to | C.C.P. § 703.140(b)(2) |
| Line from Schedule A/B: 3.2 | | any applicable statutory limit | |
| Brief description: Household goods and furnishings Line from | \$650.00 | \$650.00 100% of fair market value, up to any applicable statutory limit | C.C.P. § 703.140(b)(3) |
| Schedule A/B: 6 Brief description: Electronics Line from Schedule A/B: 7 | \$650.00 | \$650.00 100% of fair market value, up to any applicable statutory limit | C.C.P. § 703.140(b)(3) |
| Brief description: Equipment for sports and hobbies Line from Schedule A/B: 9 | \$650.00 | \$650.00 100% of fair market value, up to any applicable statutory limit | C.C.P. § 703.140(b)(3) |
| Brief description: 1 Firearm Line from Schedule A/B: 10 | \$400.00 | \$400.00 100% of fair market value, up to any applicable statutory limit | C.C.P. § 703.140(b)(3) |
| Brief description: Clothes Line from Schedule A/B: 11 | \$650.00 | \$650.00 100% of fair market value, up to any applicable statutory limit | C.C.P. § 703.140(b)(3) |
| Brief description: 500.00 Federal tax | \$500.00 | \$500.00 100% of fair market value, up to any applicable statutory limit | C.C.P. § 703.140(b)(5) |
| Line from Schedule A/B: 28 | | | |
| Brief description: Potential Return on Listing | \$14,000.00 | \$14,000.00 | C.C.P. § 703.140(b)(5) |
| Line from Schedule A/B: 35 | | ☐ 100% of fair market value, up to any applicable statutory limit | |

| _ | | _ | | | | |
|--|----------------------------|---------------------|---|---|---|--------------------------|
| Fill in this information t | o identify your case: | | | red 04/15/19 2 59 | 21:46:21 De | SC |
| Debtor 1 | Dominic | | Caruso | | | |
| | First Name | Middle Name | Last Name | | | |
| Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Name | | | |
| United States Bankru | | | entral District of California | | | |
| | proy Court for the. | | chiral biothict of Gamorina | | Charlet # 4 | -:- : |
| Case number (if known) | | | | | Check if the distribution of the character is a contracted. | |
| Official Form | | | ava Claims Sagura | d by Dropo | ert. | |
| schedule L |): Creditors | s wno H | ave Claims Secured | a by Prope | erty | 12/15 |
| nown). Do any creditors hav No. Check this bo Yes. Fill in all of the | re claims secured by yo | our property? | es, and attach it to this form. On the top o | | -, , | (· |
| 2. List all secured cl | laims. If a creditor has n | nore than one sec | cured claim, list the creditor separately for | Column A | Column B | Column C |
| each claim. If mor | | a particular claim | , list the other creditors in Part 2. As much | Amount of claim Do not deduct the value of collateral. | Value of collateral that supports this claim | Unsecured portion If any |
| 2.1 Franchise Tax Bo | pard | Describe t | he property that secures the claim: | \$6,000.00 | \$0.00 | \$6,000.00 |
| Creditor's Name | HADI IDTOVANO AO AO | | | | | |
| PO BOX 942867 | NKRUPTCY MS A340 | — | | | | |
| Number Str | eet | As of the da | ate you file, the claim is: Check all that apply. | | | |
| Sacramento, CA | | Conting | | | | |
| City | State ZIP Cod | | | | | |
| Who owes the do | ebt? Check one. | Dispute | | | | |
| Debtor 2 only | | | ien. Check all that apply. | | | |
| Debtor 1 and D | Debtor 2 only | | ement you made (such as mortgage or d car loan) | | | |
| At least one of | the debtors and another | · ✓ Statutor | y lien (such as tax lien, mechanic's lien) | | | |
| ☐ Check if this o | | Judgme | ent lien from a lawsuit | | | |
| community de | ebt | Othor (i | neluding a right to offeat) | | | |

Other (including a right to offset)

Add the dollar value of your entries in Column A on this page. Write that number here:

Last 4 digits of account number ___ __ __

Date debt was incurred

5/13/2009

\$6,000.00

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First Name

Part 1:

Additional Page

After listing any entries on this page, number them beginning with 2.3 followed by 2.4 and so forth

Column A Amount of claim Do not deduct the

Column B Value of collateral that supports

Column C Unsecured portion

| 2.5, followed by 2.4, and so | Tortii. | value of collateral. | tnis ciaim | If any |
|---|---|----------------------|--------------|--------|
| Internal Revenue Service Creditor's Name Centralized Insolvency Operation Po Box 7346 Number Street Philadelphia, PA 19101-7346 City State ZIP Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Date debt was incurred 5/7/2008 | Describe the property that secures the claim: Single Family Home 18771 Flagstaff Lane Huntington Beach, CA 92646 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset) Last 4 digits of account number | \$26,837.00 | \$946,700.00 | \$0.00 |
| Mr. Cooper Creditor's Name Po Box 619098 Number Street Dallas, TX 75261-9098 City State ZIP Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Date debt was incurred 5/18/2005 | Describe the property that secures the claim: Single Family Home 18771 Flagstaff Lane Huntington Beach, CA 92646 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset) Last 4 digits of account number | \$700,000.00 | \$946,700.00 | \$0.00 |
| Add the dollar value of your entries in Col | umn A on this page. Write that number here: | \$726,83 | 37.00 | |
| | | | | |

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|---|----|---|---|--|
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| | aı | ι | | |
| | | | | |

Additional Page

After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.

Column A Amount of claim Do not deduct the value of collateral.

Column B Value of collateral that supports this claim

Column C Unsecured portion

| | | | ~ , |
|---|--|--------------|---------------------|
| 2.4 Real Time Resolutions Creditor's Name Attn: Bankruptcy PO Box 36655 Number Street Dallas, TX 75235-1655 City State ZIP Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Date debt was incurred | Describe the property that secures the claim: Single Family Home 18771 Flagstaff Lane Huntington Beach, CA 92646 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset) | \$150,000.00 | \$946,700.00 \$0.00 |
| 2.5 Toyota Financial Services Creditor's Name Po Box 9786 Number Street Cedar Rapids, IA 52409 City State ZIP Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Date debt was incurred 5/1/2017 | Describe the property that secures the claim: 2007 GX Lexus 470 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset) Last 4 digits of account number 0 0 0 1 | \$8,730.00 | \$0.00 \$8,730.00 |
| Add the dollar value of your entries in Col | umn A on this page. Write that number here: | \$158,730.00 | |
| If this is the last page of your form, add the here: | e dollar value totals from all pages. Write that number | \$891,567.00 | |

| Fill in this information t | | | 4 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 | red 04/15/19 21: | 46·21 | Desc | |
|--|---|--|---|---|---|---|-------------------------|
| | to identify your case: | | | 59 | O.ZI | D C30 | |
| Debtor 1 | Dominic | | Caruso | | | | |
| | First Name | Middle Name | Last Name | | | | |
| Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Name | | | | |
| United States Bankru | ptcv Court for the: | Ce | entral District of California | | | | |
| Case number (if known) | | | | | | ck if this is an | |
| Official Form | 106E/F | | | | | | |
| Schedule E | E/F: Credit | tors Who | Have Unsecured Cl | laims | | | 12/15 |
| Part 1: List All c | of Your PRIORITY | | nal pages, write your name and case nur | , | | | |
| No. Go to Pa Yes. List all of your pr identify what type possible, list the c Part 1. If more that | iority unsecured clai of claim it is. If a clain laims in alphabetical an one creditor holds | n has both priority and order according to the a particular claim, lis | more than one priority unsecured claim, lis d nonpriority amounts, list that claim here a e creditor's name. If you have more than tv t the other creditors in Part 3. | nd show both priority and n | onpriority an | nounts. As muc | h as |
| No. Go to Pa Yes. List all of your pr identify what type possible, list the c Part 1. If more that | iority unsecured clai of claim it is. If a clain laims in alphabetical an one creditor holds | ims. If a creditor has n has both priority and order according to the a particular claim, lis | more than one priority unsecured claim, lis d nonpriority amounts, list that claim here a e creditor's name. If you have more than tv | nd show both priority and n | onpriority an | nounts. As muc | h as age of |
| No. Go to Pa Yes. List all of your pr identify what type possible, list the c Part 1. If more that | iority unsecured clai of claim it is. If a clain laims in alphabetical an one creditor holds | ims. If a creditor has n has both priority and order according to the a particular claim, lis | more than one priority unsecured claim, lis d nonpriority amounts, list that claim here a e creditor's name. If you have more than tv t the other creditors in Part 3. | nd show both priority and n vo priority unsecured claims | onpriority and s, fill out the | nounts. As muc Continuation Pa | h as age of ority |
| No. Go to Pa Yes. List all of your pr identify what type possible, list the c Part 1. If more that | rt 2. iority unsecured clai of claim it is. If a clain laims in alphabetical an one creditor holds on of each type of clai | ims. If a creditor has n has both priority and order according to the a particular claim, lis | more than one priority unsecured claim, list d nonpriority amounts, list that claim here a e creditor's name. If you have more than two theorem that the other creditors in Part 3. This form in the instruction booklet.) Last 4 digits of account number | nd show both priority and n vo priority unsecured claims Total | onpriority and s, fill out the Priority | nounts. As muc Continuation Pa Nonpri | h as age of ority |
| No. Go to Pa Yes. 2. List all of your pr identify what type possible, list the c Part 1. If more tha (For an explanation Priority Creditor's | rt 2. iority unsecured clai of claim it is. If a clain laims in alphabetical an one creditor holds on of each type of clai | ims. If a creditor has n has both priority and order according to the a particular claim, lis | more than one priority unsecured claim, list donorpriority amounts, list that claim here are creditor's name. If you have more than two the other creditors in Part 3. | nd show both priority and n vo priority unsecured claims Total claim | onpriority and s, fill out the Priority | nounts. As muc Continuation Pa Nonpri | h as age of ority |

Is the claim subject to offset?

☐ No☐ Yes

☐ Claims for death or person injury while you were intoxicated
☐ Other. Specify

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| First Name Middle Name Main L | April Page 27 of 59 | |
|--|---|-----------------------------|
| Part 2: List All of Your NONPRIORITY Unsecured Cla | aims | |
| unsecured claim, list the creditor separately for each claim. For each | | included in Part 1. If more |
| | | Total claim |
| 4.1 Capital One | Last 4 digits of account number 6383 | \$4,693.00 |
| Nonpriority Creditor's Name | When was the debt incurred? 06/01/2014 | |
| PO Box 30285 Number Street | — As of the date you file, the claim is: Check all that apply. | |
| Salt Lake City, UT 84130 | ☐ Contingent | |
| City State ZIP Code | ─ ☐ Unliquidated | |
| Who incurred the debt? Check one. | ☐ Disputed | |
| Debtor 1 only | Type of NONPRIORITY unsecured claim: | |
| Debtor 2 only | Student loans | |
| Debtor 1 and Debtor 2 only | Obligations arising out of a separation agreement or | |
| At least one of the debtors and another | divorce that you did not report as priority claims | |
| ☐ Check if this claim is for a community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| Is the claim subject to offset? | ☑ Other. Specify CreditCard | |
| ☑ No | Creditodia | |
| ☐ Yes | | |
| 4.2 Capital One | Last 4 digits of account number 2795 | \$3,634.00 |
| Nonpriority Creditor's Name | When was the debt incurred? 08/01/2014 | |
| PO Box 30285 | As of the date you file, the claim is: Check all that apply. | |
| Number Street | Contingent | |
| Salt Lake City, UT 84130 | Unliquidated | |
| City State ZIP Code | ☐ Disputed | |
| Who incurred the debt? Check one. | · | |
| ☑ Debtor 1 only | Type of NONPRIORITY unsecured claim: Student loans | |
| Debtor 2 only | Obligations arising out of a separation agreement or | |
| Debtor 1 and Debtor 2 only | divorce that you did not report as priority claims | |
| At least one of the debtors and another | Debts to pension or profit-sharing plans, and other | |
| Check if this claim is for a community debt | similar debts | |
| Is the claim subject to offset? | ☑ Other. Specify | |
| ☑ No | CreditCard | |
| ☐ Yes | | |
| 4.3 Capital One | Last 4 digits of account number 8597 | \$1,509.00 |
| Nonpriority Creditor's Name | | |
| PO Box 30285 | When was the debt incurred? 09/01/2012 | |
| Number Street | As of the date you file, the claim is: Check all that apply. | |
| Salt Lake City, UT 84130 | ☐ Contingent☐ Unliquidated | |
| City State ZIP Code | ☐ Disputed | |
| Who incurred the debt? Check one. | · | |
| ☑ Debtor 1 only | Type of NONPRIORITY unsecured claim: ☐ Student loans | |
| Debtor 2 only | _ | |
| ☐ Debtor 1 and Debtor 2 only | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| At least one of the debters and enother | × | |

 $\ \square$ At least one of the debtors and another

 $\ \square$ Check if this claim is for a community debt

☐ Yes

similar debts Other. Specify CreditCard

Debts to pension or profit-sharing plans, and other

Maindardeument Page 28 of 59 Case number (if known)

Dominic

First Name Middle Name Last Name

| After listing any entries on this page, number them beg | ginning with 4.5, followed by 4.6, and so forth. | Total claim |
|---|---|-------------|
| Dell Financial Services LLC | Last 4 digits of account number 1842 | \$0.00 |
| Nonpriority Creditor's Name | When was the debt incurred? 12/01/2014 | |
| Po Box 81607 | As of the date you file, the claim is: Check all that apply. | |
| Number Street | ☐ Contingent | |
| Austin, TX 78708 City State ZIP Code | Unliquidated | |
| Who incurred the debt? Check one. | ☐ Disputed | |
| Debtor 1 only | Type of NONPRIORITY unsecured claim: | |
| Debtor 2 only | ☐ Student loans | |
| Debtor 1 and Debtor 2 only | Obligations arising out of a separation agreement or | |
| At least one of the debtors and another | divorce that you did not report as priority claims | |
| Check if this claim is for a community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| Is the claim subject to offset? ☑ No | ☑ Other. Specify ChargeAccount | |
| Yes | | |
| Franchise Tax Board Nonpriority Creditor's Name | Last 4 digits of account number | unknown |
| PERSONAL BANKRUPTCY MS A340 | When was the debt incurred? | |
| PO BOX 942867 | As of the date you file, the claim is: Check all that apply. | |
| Number Street | Contingent ✓ | |
| Sacramento, CA 94267 | Unliquidated | |
| City State ZIP Code | ✓ Disputed | |
| Who incurred the debt? Check one. | Type of NONPRIORITY unsecured claim: | |
| Debtor 1 only | Student loans | |
| Debtor 2 only | Obligations arising out of a separation agreement or | |
| Debtor 1 and Debtor 2 only | divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other | |
| At least one of the debtors and another | similar debts | |
| Check if this claim is for a community debt | Other. Specify | |
| Is the claim subject to offset? | , , | |
| ☑ No | | |
| ☐ Yes | | |
| Internal Revenue Service | Last 4 digits of account number | unknown |
| Nonpriority Creditor's Name | • | |
| Centralized Insolvency Operation | When was the debt incurred? | |
| Po Box 7346 | As of the date you file, the claim is: Check all that apply. Contingent | |
| Number Street | ✓ Contingent ✓ Unliquidated | |
| Philadelphia, PA 19101-7346 City State ZIP Code | | |
| • | ☑ Disputed | |
| Who incurred the debt? Check one. Debtor 1 only | Type of NONPRIORITY unsecured claim: | |
| _ ′ | ☐ Student loans | |
| Debtor 2 only | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| Debtor 1 and Debtor 2 only | Debts to pension or profit-sharing plans, and other | |
| At least one of the debtors and another | similar debts | |
| ☐ Check if this claim is for a community debt | Other. Specify | |
| Is the claim subject to offset? | | |
| ☑ No | | |
| ☐ Yes | | |

Dominic Maindaosument Page 29 of 59 Case number (if known)

First Name Middle Name Last Name

| Part 2: Your NONPRIORITY Unsecured Claims - Con | ntinuation Page | |
|--|---|-----------------|
| After listing any entries on this page, number them beginning w | vith 4.5, followed by 4.6, and so forth. | Total claim |
| 4.7 Wells Fargo Bank Nonpriority Creditor's Name Po Box 14517 Number Street Des Moines, IA 50306 City State ZIP Code Who incurred the debt? Check one. | Last 4 digits of account number 1271 When was the debt incurred? 09/16/2005 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed | <u>\$917.00</u> |
| Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes | Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ☑ Other. Specify UnknownLoanType | |

Dominic

Maindanceument Page 30 of 59 Case number (if known) First Name Middle Name Last Name

Part 4: Add the Amounts for Each Type of Unsecured Claim

| | nounts of certain types of unsecured claims. This informat ecured claim. | ion is for stati | stical reporting purposes only. 28 U.S.C | C. §159. Add the amounts for each |
|--------------------------|---|------------------|--|-----------------------------------|
| ,, | | | | |
| | | | | ı |
| | | | Total claim | |
| | | | | |
| Total claims | 6a. Domestic support obligations | 6a. | \$0.00 | |
| from Part 1 | 6b. Taxes and certain other debts you owe the government | 6b. | \$0.00 | |
| | 6c. Claims for death or personal injury while you were intoxicated | 6c. | \$0.00 | |
| | Other. Add all other priority unsecured claims. Write that amount here. | 6d. + | \$0.00 | |
| | 6e. Total. Add lines 6a through 6d. | 6e. | \$0.00 | |
| | | | | • |
| | | | Total claim | |
| | 6f. Student loans | 6f. | \$0.00 | |
| Total claims from Part 2 | 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$0.00 | |
| | 6h. Debts to pension or profit-sharing plans, and other similar debts | 6h. | \$0.00 | |
| | 6i. Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. + | \$10,753.00 | |
| | 6j. Total. Add lines 6f through 6i. | 6j. | \$10.753.00 | |

\$10,753.00

| Fill in this information | to identify your case: | | | red 04/1 .g. 59 | 15/19 21:46:21 | Desc |
|---------------------------|------------------------|-------------|-------------------------------|--------------------|----------------|-------------------------------------|
| Debtor 1 | Dominic | | Caruso | | | |
| | First Name | Middle Name | Last Name | | | |
| Debtor 2 | | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | | |
| United States Bankr | uptcy Court for the: | C | entral District of California | | | |
| Case number (if known) | | | | | - - | heck if this is an nended filing |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☑No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| | Person or o | company with wh | om you have | e the contract or lease | State what the contract or lease is for |
|-----|-------------|-----------------|-------------|-------------------------|---|
| 2.1 | | | | | |
| | Name | | | | |
| | Number | Street | | | |
| | City | | State | ZIP Code | |
| 2.2 | | | | | |
| | Name | | | | |
| | Number | Street | | | |
| | City | | State | ZIP Code | <u> </u> |
| 2.3 | | | | | |
| | Name | | | | |
| | Number | Street | | | |
| | City | | State | ZIP Code | |
| 2.4 | | | | | |
| | Name | | | | |
| | Number | Street | | | <u> </u> |
| | City | | State | ZIP Code | |
| 2.5 | | | | | |
| | Name | | | | |
| | Number | Street | | | |
| | City | | State | ZIP Code | |

| _ | | | | |
|------------------------|----------------------------|--------------------------|------------------------------|---|
| Fill in this informati | ion to identify your case: | | | ed 04/15/19 21:46:21 Desc 59 |
| Debtor 1 | Dominic | | Caruso | - 49-52-5 |
| DODIO! ! | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | |
| United States Bar | nkruptcy Court for the: | Ce | entral District of Californ | ia |
| Case number | | | | Check if this is an amended filing |
| (II KHOWH) | | | | anended ming |
| Official For | rm 106H | | | |
| | e H: Your Co | ndehtors | | 40/45 |
| | | | | 12/15 |
| both are equally re | sponsible for supplying | correct information | n. If more space is neede | complete and accurate as possible. If two married people are filing together, ed, copy the Additional Page, fill it out, and number the entries in the boxes on rite your name and case number (if known). Answer every question. |
| | | | do not list either spouse a | , |
| n. Do you nave a | iny codebiors: (ii you ai | e illing a joint case, t | do not list eltrier spouse a | s a codebiol.) |
| ☐Yes | | | | |
| 2. Within the last | t 8 years, have you lived | I in a community pro | operty state or territory? | (Community property states and territories include Arizona, California, Idaho, |
| | rada, New Mexico, Puerto | | | |
| ☐ No. Go to lii | | | | |
| | ur spouse, former spouse | e, or legal equivalent | live with you at the time? | |
| ✓No | | | | - 11 |
| Yes. In v | which community state or | territory did you live? | · | |
| Name | | | | |
| Number | Street | | | |
| City | | State ZIP Code | | |
| 3. In Column 1, li | ist all of your codebtors | . Do not include you | ır spouse as a codebtor | if your spouse is filing with you. List the person shown in line 2 again as a |
| | | | | d the creditor on Schedule D (Official Form 106D), Schedule E/F (Official or Schedule G to fill out Column 2. |
| Column 1: You | r codebtor | | | Column 2: The creditor to whom you owe the debt |
| | | | | Check all schedules that apply: |
| 3.1 | | | | Schedule D, line |

Official Form 106H Schedule H: Your Codebtors page 1 of 1

Name

Number

City

Street

State

ZIP Code

Schedule D, line ____

Schedule E/F, line Schedule G, line _____

| Fill | in this information to | identify your ca | se: | | | _ | ed 04 59 | /15/19 21:4 | 6:21 | Desc | |
|-----------|--|---|--|-------------------------------|-----------|------------|-------------|-------------------------------|---------------|------------------------------|----------------------------|
| D | ebtor 1 | Dominic First Name | Middle Name | Caruso Last Name | - | | | | | | |
| (S U | ebtor 2 Spouse, if filing) nited States Bankrup ase number known) | First Name tcy Court for the | Middle Name Cent | Last Name ral District of Cal | ifornia | | | A sup | mended filing | owing postp e as of the f | etition following date: |
| Se a | | Your In | ICOME Die. If two married people at this price is the people of this price is the people of the peo | | | | | | | | |
| po ddi | use is not filing with itional pages, write y | you, do not ind our name and d Employment | clude information about y case number (if known). A | our spouse. If mo | ore space | | | | | | |
| 1. | Fill in your employinformation. | ment | | Debto | r 1 | | | Debto | r 2 or non-fi | iling spous | se |
| | If you have more that attach a separate partification about accemployers. Include part time, se self-employed work. | age with dditional easonal, or | Employment status Occupation Employer's name Employer's address | Self-Employe | /ed Rea | | | □ Employe | ed 🔲 Not En | nployed | |
| | Occupation may inc or homemaker, if it a | | | Number St | reet | | | Number St | | | |
| | | | How long employed the | City ere? 16 years | | State — | Zip Code | City | | State Z | Zip Code |
| Pa | art 2: Give Deta | ils About Mo | onthly Income | | | | | | | | |
| | are separated. | ing spouse have | e date you file this form. If | | · | | | · | | | • |
| | anaon a separate si | ioot to tillo lolli. | | | | Fo | r Debtor 1 | For Debtor 2 non-filing sp | | | |
| 2. | | | and commissions (before a ulate what the monthly wag | | 2. | | \$0.00 | | \$0.00 | | |
| 3. | Estimate and list m | nonthly overtim | е рау. | | 3. | + | \$0.00 | + | \$0.00 | | |

\$0.00

\$0.00

4. Calculate gross income. Add line 2 + line 3.

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Debtor 1 Main Diocument Page 34 of 59 For Debtor 1 For Debtor 2 or non-filing spouse Copy line 4 here.....→ 4. \$0.00 \$0.00 List all payroll deductions: \$0.00 \$0.00 5a. Tax, Medicare, and Social Security deductions 5a. \$0.00 \$0.00 5b. Mandatory contributions for retirement plans 5b. \$0.00 \$0.00 5c. Voluntary contributions for retirement plans 5c. \$0.00 \$0.00 5d. Required repayments of retirement fund loans 5d. \$0.00 \$0.00 5e. Insurance 5e. \$0.00 \$0.00 5f. Domestic support obligations 5f \$0.00 \$0.00 5g. Union dues 5g. \$0.00 \$0.00 5h. 5h. Other deductions. Specify: _ Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h. 6. 6. \$0.00 \$0.00 7 Calculate total monthly take-home pay. Subtract line 6 from line 4. 7 \$0.00 \$0.00 List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8a. \$2.500.00 \$0.00 8b. Interest and dividends \$0.00 8h \$0.00 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce \$0.00 \$0.00 settlement, and property settlement. 8c. \$0.00 \$0.00 8d. Unemployment compensation 8d. \$0.00 \$0.00 8e. Social Security 8e. 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. \$0.00 \$0.00 ٨f Specify: _ \$0.00 \$0.00 8g. 8g. Pension or retirement income \$0.00 \$0.00 8h. Other monthly income. Specify: _ \$0.00 \$2,500.00 **Add all other income.** Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h. 9. 9. Calculate monthly income. Add line 7 + line 9. \$0.00 Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse 10 State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. \$0.00 Specify: 11. + 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that

Case 8:19-bk-11384-TA Doc Larusoiled 04/15/19 Entered 04/15/19 21:46:21 Desc First Name Main Document Page 35 of 59

| 8a. Attac | 8a. Attached Statement | | | | | | | |
|-----------|--|--------|------------|--|--|--|--|--|
| | Business Income | | | | | | | |
| FINANC | FINANCIAL REVIEW OF THE DEBTOR'S BUSINESS (NOTE: ONLY INCLUDE information directly related to the business operation.) | | | | | | | |
| PART A | - ESTIMATED AVERAGE FUTURE GROSS MONTHLY INCOME: | | | | | | | |
| 1 | Gross Monthly Income: | | \$2,500.00 | | | | | |
| PART B | - ESTIMATED AVERAGE FUTURE MONTHLY EXPENSES: | | | | | | | |
| 2 | Payments to be Made Directly by Debtor to Secured Creditors for Pre-Petition Business Debts | | | | | | | |
| | TOTAL PAYMENTS TO SECURED CREDITORS | \$0.00 | | | | | | |
| 3 | Other Expenses | | | | | | | |
| | TOTAL OTHER EXPENSES | \$0.00 | | | | | | |
| 4 | TOTAL MONTHLY EXPENSES(Add item 2 - 21) | | \$0.00 | | | | | |
| PART C | - ESTIMATED AVERAGE NET MONTHLY INCOME: | | | | | | | |
| 5 | AVERAGE NET MONTHLY INCOME(Subtract item 23 from item 1) | | \$2,500.00 | | | | | |

| Fill | in this information to ider | ntify your case: | | 1 =: | | ed 04/15/19 2 | 1:46:21 | Desc |
|------|---|----------------------|---|---------------------------------------|---|---------------------|--|---------------------------|
| | | | | | | 59 | | |
| D | | ominic st Name | Middle Name | Caruso Last Name | | 01 1 1 1 1 1 1 | | |
| | | st ivallie | Middle Name | Last Name | | Check if this is: | | |
| | ebtor 2 spouse, if filing) Fire | st Name | Middle Name | Last Name | | An amended fili | - | |
| | - | | | | | ☐A supplement s | showing postpetit me as of the folk | |
| U | nited States Bankruptcy C | Court for the: | C | entral District of | California | 5.14p.to. 10 ii.100 | | July date. |
| _ | ase number known) | | | | | MM / DD / YYY | $\overline{\gamma}$ | |
| Эf | ficial Form 10 | <u>16J</u> | | | | | | |
| Sc | chedule J: Y | our Exp | oenses | | | | | 12/15 |
| ee | | et to this form. C | | | ther, both are equally respo write your name and case r | | | |
| 1 | Is this a joint case? | | | | | | | |
| ١. | _ | | | | | | | |
| | ✓ No. Go to line 2. Yes. Does Debtor 2 ☐ No ☐ Yes. Debtor | · | | Eynenses for Ser | parate Household of Debtor 2: | | | |
| _ | | | | _xpcrises for dep | drate Floaseriola of Debtor 2. | • | | |
| 2. | Do you have depender Do not list Debtor 1 and Debtor 2. | nts? | ☐ No ☐ Yes. Fill out this each dependen | | Dependent's relationship Debtor 1 or Debtor 2 | to Depend | | es dependent live you? |
| | Do not state the depende | ents' names. | each dependen | · · · · · · · · · · · · · · · · · · · | Child | 12 | | No. ✓ Yes. |
| | | | | | Child | | | No. ⊈ Yes. |
| | | | | | | | N | No. Yes. |
| | | | | | | | N | No. Yes. |
| | | | | | | | | No. Yes. |
| 3 | Do your expenses inclu | ıda avnansas | ₩No | | | | | |
| J. | of people other than your dependents? | • | Yes | | | | | |
| Pa | ert 2: Estimate You | ır Ongoing M | onthly Expense | es | | | | |
| | | | | | ng this form as a supplemer the top of the form and fill | | | enses as of a date after |
| | lude expenses paid for ch assistance and have | | | | | | Your exper | ises |
| 4. | The rental or home own ground or lot. | nership expense | es for your residen | ice. Include first m | nortgage payments and any r | ent for the 4. | | \$3,500.00 |
| | If not included in line 4 | i: | | | | | | |
| | 4a. Real estate taxes | | | | | 4 a. | | \$800.00 |
| | 4b. Property, homeowne | er's, or renter's in | surance | | | 4b. | | \$75.00 |

4c. Home maintenance, repair, and upkeep expenses

4d. Homeowner's association or condominium dues

4c.

4d.

\$150.00

\$0.00

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| | | | Your expenses |
|--------------------|---|------|---------------|
| 5. Addit | ional mortgage payments for your residence, such as home equity loans | 5. | |
| 6. Utiliti | es: | | |
| 6a. El | lectricity, heat, natural gas | 6a. | \$160.00 |
| 6b. W | /ater, sewer, garbage collection | 6b. | \$80.00 |
| 6c. Te | elephone, cell phone, Internet, satellite, and cable services | 6c. | \$200.00 |
| 6d. Ot | ther. Specify: | 6d. | \$0.00 |
| 7. Food | and housekeeping supplies | 7. | \$600.00 |
| 8. Childe | care and children's education costs | 8. | \$300.00 |
| 9. Cloth | ning, laundry, and dry cleaning | 9. | \$150.00 |
| 10. Perso | onal care products and services | 10. | \$150.00 |
| | cal and dental expenses | 11. | \$300.00 |
| | sportation. Include gas, maintenance, bus or train fare. | | φοσοισσ |
| | ot include car payments. | 12. | \$250.00 |
| 13. Enter | tainment, clubs, recreation, newspapers, magazines, and books | 13. | \$100.00 |
| 14. Chari | itable contributions and religious donations | 14. | \$100.00 |
| 15. Insur a | ance. | | |
| Do no | ot include insurance deducted from your pay or included in lines 4 or 20. | | |
| 15a. L | Life insurance | 15a. | \$0.00 |
| 15b. H | Health insurance | 15b. | \$0.00 |
| 15c. \ | /ehicle insurance | 15c. | \$125.00 |
| 15d. C | Other insurance. Specify: | 15d. | \$0.00 |
| 16. Taxes | s. Do not include taxes deducted from your pay or included in lines 4 or 20. | | |
| Speci | fy: | 16. | \$0.00 |
| 17. Instal | lment or lease payments: | | |
| 17a. C | Car payments for Vehicle 1 | 17a. | \$284.00 |
| 17b. C | Car payments for Vehicle 2 | 17b. | |
| | Other. Specify: | 17c. | |
| 17d. C | Other. Specify: | 17d. | |
| | payments of alimony, maintenance, and support that you did not report as deducted your pay on line 5, Schedule I, Your Income (Official Form 106I). | 18. | \$0.00 |
| | r payments you make to support others who do not live with you. fy: | 19. | \$0.00 |
| | r real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. | | |
| 20a. N | Mortgages on other property | 20a. | \$0.00 |
| 20b. F | Real estate taxes | 20b. | \$0.00 |
| 20c. F | Property, homeowner's, or renter's insurance | 20c. | \$0.00 |
| 20d. N | Maintenance, repair, and upkeep expenses | 20d. | \$0.00 |
| 20e. H | Homeowner's association or condominium dues | 20e. | \$0.00 |

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| 21. | Other. Specify: | | 21. | + \$0.00 |
|-----|---------------------|---|------|---------------------|
| 22. | Calculate your me | onthly expenses. | | |
| | 22a. Add lines 4 th | rough 21. | 22a. | \$7,324.00 |
| | 22b. Copy line 22 | (monthly expenses for Debtor 2), if any, from Official Form 106J-2 | 22b. | \$0.00 |
| | 22c. Add line 22a | and 22b. The result is your monthly expenses. | 22c. | \$7,324.00 |
| 23. | Calculate your m | onthly net income. | | |
| | 23a. Copy line 12 | your combined monthly income) from Schedule I. | 23a. | \$2,500.00 |
| | 23b. Copy your mo | onthly expenses from line 22c above. | 23b. | - \$7,324.00 |
| | 23c. Subtract your | monthly expenses from your monthly income. | | (0.00.00) |
| | The result is | your monthly net income. | 23c. | (\$4,824.00) |
| 24. | For example, do y | increase or decrease in your expenses within the year after you file this form? but expect to finish paying for your car loan within the year or do you expect your to increase or decrease because of a modification to the terms of your mortgage? | | |
| | ✓ No. ☐ Yes. | | | |
| | | | | |

Entered 04/15/19 21:46:21 Case 8:19-bk-11384-TA Doc 1 Filed 04/15/19 Page 39 of 59 Main Document Fill in this information to identify your case: Debtor 1 Dominic Caruso First Name Middle Name Last Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: Central District of California Case number Check if this is an (if known) amended filing Official Form 106Dec Declaration About an Individual Debtor's Schedules 12/15 If two married people are filing together, both are equally responsible for supplying correct information. You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Sign Below Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? V No Yes. Name of person -Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct. Dominic Caruso, Debtor 1

Date 04/15/2019

MM/ DD/ YYYY

MM/ DD/ YYYY

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| this information | to identify your case: | | SET THE EN | |
|------------------------|------------------------|-------------|-------------------------------|--|
| Debtor 1 | Dominic | | Caruso | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | · | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | |
| United States Bankru | ptcy Court for the: | Ce | entral District of California | |
| Case number (if known) | | | | |

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

04/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| State ZIP Code City State ZIP Code Same as Debtor 1 From Number Street | uring the last 3 years, | have you lived anywhere | other than where you live n | ow? | | |
|--|-------------------------|---------------------------------|--|--------------------|----------------|--------------------|
| Dates Debtor 1 lived there Same as Debtor 2 Dates Debtor 2 lived there | 1 No | | | | | |
| there Same as Debtor 1 | | aces you lived in the last 3 ye | 1-1 Star (200 St | | | |
| From To Number Street To | Debtor 1: | | | Debtor 2: | | |
| Number Street To | | | | ☐ Same as Debtor 1 | | ☐ Same as Debtor 1 |
| State ZIP Code City State ZIP Code Same as Debtor 1 From Number Street | | | From | | | From |
| Same as Debtor 1 Same as Debtor 1 From From From | umber Street | | | Number Street | | То |
| From From From | ity | State ZIP Code | _ | City | State ZIP Code | - |
| Number Street | | | | ☐ Same as Debtor 1 | | Same as Debtor 1 |
| Number Street To | | | From | | | From |
| | umber Street | | To | Number Street | | То |
| | ity | State ZIP Code | _ | City | State ZIP Code | |
| | umber Street | State ZIP Code | | ☐ Same as Debtor 1 | State ZIP Code | From |
| City State 7IP Code | ty | State ZIP Code | | Oity | State Zir Gode | |

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| btor 1 | Dominic First Name Middle | Caruso Name Last Name | | Case number (if known | own) |
|-----------------|--|--|------------------------------------|---|--------------------------------------|
| | First Name Middle | Name Last Name | | | |
| | ne last 8 years, did you ever live w cona, California, Idaho, Louisiana, I | | | | nity property states and territories |
| iude Anz | ona, California, Idano, Louisiana, i | ivevada, ivew iviexico, Fuerio F | ico, rexas, washington, and t | VISCOTISIT.) | |
| | | v 0 1 1 10m 15 | 40011) | | |
| Yes. N | Make sure you fill out Schedule H: | Your Codebtors (Official Form | 106H). | | |
| | | | | | |
| rt 2: E | xplain the Sources of Your | Income | | | |
| Did you k | have any income from employme | ont or from operating a busine | oce during this year or the hu | o provious calendar vears | 2 |
| I in the to | tal amount of income you received | d from all jobs and all businesse | es, including part-time activities | | |
| | ing a joint case and you have incor | me that you receive together, lis | t it only once under Debtor 1. | | |
| ☐ No | | | | | |
| √ Yes. F | Fill in the details. | SHART WATER OF STATE AND LINE AT A STATE OF STAT | | | |
| | | Debtor 1 | | Debtor 2 | |
| | | Sources of income | Gross Income | Sources of income | Gross Income |
| | | Check all that apply. | (before deductions and exclusions) | Check all that apply. | (before deductions and exclusions) |
| | nuary 1 of current year until the | ☐ Wages, commissions, bonuses, tips | | ☐ Wages, commissions, bonuses, tips | |
| date you | filed for bankruptcy: | | \$12,000.00 | Operating a business | |
| | | D.W | | | |
| | to December 31, 2018 | ■ Wages, commissions, bonuses, tips | | Wages, commissions, bonuses, tips | |
| (January | YYYY | ✓ Operating a business | \$17,102.00 | Operating a business | |
| For the c | calendar year before that: | ☐ Wages, commissions, | | ☐ Wages, commissions, | |
| | 1 to December 31, 2017 | bonuses, tips | | bonuses, tips | |
| | YYYY | ✓ Operating a business | \$34,390.00 | Operating a business | |
| clude inco | receive any other income during one regardless of whether that incorpensions; rental income; interest; d | ome is taxable. Examples of oth | ner income are alimony; child s | | |
| | e that you received together, list it | | riawsults, royalites, and gamb | ing and lottery winnings. If y | you are ming a joint case and you |
| √ No | | | | | |
| Yes. I | Fill in the details. | | | | |
| | | Debtor 1 | | Debtor 2 | |
| | | Sources of income | Gross income from each | Sources of income | Gross Income from each |
| | | Describe below. | source | Describe below. | source |
| | | | (before deductions and exclusions) | | (before deductions and exclusions) |
| | nuary 1 of current year until the filed for bankruptcy: | <u> </u> | | | <u></u> |
| | ,5 % | | · | | |
| | | | | | |

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| Debtor 1 | Dominic | | Caruso | | Case number (if | known) |
|----------------|---------------------|--|--|-----------------------------------|---|---------------------------------------|
| | First Name | Middle Name | Last Name | | | |
| For last | calendar year: | | | | | |
| | 1 to December 3 | | | | | |
| | | YYYY | | | | |
| | | | | | | |
| | calendar year be | | | | - | |
| (Januar) | 1 to December 3 | 31, <u>2017</u>) | | T | _ | |
| | | | | e (| | |
| | | | | | | |
| Part 2 | ist Cortain B | ayments You Made E | oforo Vou Eilor | l for Bonkruntov | | |
| rant Si | ist certain r | ayments fou made t | selore rou Filed | тог ванктиресу | | |
| 6. Are eith | er Debtor 1's or I | Debtor 2's debts primarily | consumer debts? | | | |
| □No. | Neither Debto | r 1 nor Debtor 2 has prima | arily consumer del | ots. Consumer debts are defi | ned in 11 U.S.C. § 101(8) as | "incurred by an |
| _ 1,10. | | arily for a personal, family, | - 1985년 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 | | 1100 117 17 0.0.0. 3 10 1(0) 0.0 | modified by diff |
| | During the 90 o | days before you filed for bar | nkruptcy, did you pay | any creditor a total of \$6,825 | 5* or more? | |
| | ☐ No. Go to li | ne 7. | | | | |
| | | | | | ore payments and the total ar | |
| | | ditor. Do not include payme ments to an attorney for this | | oport obligations, such as ch | ild support and alimony. Also | , do not include |
| | * Subject to ad | ustment on 4/01/22 and even | ery 3 years after tha | t for cases filed on or after the | e date of adjustment. | |
| _, | | | | | | |
| √ Yes. | | ebtor 2 or both have prim | ACCUSC CONTRACTOR IN THE SERVICE SERVICE SERVICES | | | |
| | 2 | | ikruptcy, did you pay | any creditor a total of \$600 c | or more? | |
| | ₩ No. Go to li | ne 7. | | | | |
| | pay | | | | amount you paid that creditor Also, do not include payment | |
| | | | Dates of | Total amount paid | Amount you still owe | Was this payment for |
| | | | payment | | | |
| | | | | | | ☐Mortgage |
| | Creditor's Name | | | | *************************************** | Car |
| | | | | _ | | Credit card |
| | Number Stree | t | | | | Loan repayment |
| | | | * | - | | ☐ Suppliers or vendors ☐ Other |
| | City | State ZIP Code | | | | Uotner |
| | City | State ZIF Code | | | | |
| | | | | | | |
| | | | | nt on a debt you owed anyo | | ner; corporations of which you are an |
| officer, dire | ector, person in co | ontrol, or owner of 20% or r | nore of their voting | | g agent, including one for a t | pusiness you operate as a sole |
| √No | | | | | | |
| Yes. | List all payments | to an insider. | | | | |
| S | , , | | | | | |
| | | | | | | |
| | | | | | | |

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| tor 1 | Dominic | | Caruse | | _ Case n | iumber (if known |) |
|-------------------|---|--------------------|---------------------|--------------------------------------|----------------------------|-----------------------------|--|
| First Name | | Middle Name | Last N | ame | | | |
| | | | Dates of payment | Total amount paid | Amount you still owe | Reason for the | s payment |
| nsider's N | Name | | | - | | | |
| Number | Street | | | - | | | |
| City | State | ZIP Code | | | | | |
| lude payı ✓ No | year before you filed freents on debts guarant | teed or cosigned b | by an insider. | payments or transfer any | property on account of | a debt that ben | efited an insider? |
| | | | Dates of payment | Total amount paid | Amount you still owe | Reason for th | |
| Insider's I | Name | | | | | | |
| Number | Street | | | - - | | | |
| City | State | ZIP Code | | | | | |
| Within 1 | dentify Legal Action year before you filed to matters, including per- | for bankruptcy, w | ere you a party in | reclosures any lawsuit, court action | n, or administrative procu | eeding? pport or custody | modifications, and contra |
| √ No | | | | | | | |
| ☐Yes. F | Fill in the details. | 10000 | | | | | |
| | | Nat | ture of the case | Cou | urt or agency | | Status of the case |
| | | | | | | | Pending |
| Case title | 9 | | | Court | Name | | ☐ On appeal |
| | mber | | | Numb City | | e ZIP Code | A TOTAL DESCRIPTION OF THE PROPERTY OF THE PRO |

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| ebtor 1 | Dominic | | Caruso | Case number (if known |) | _ |
|---------------|--|----------------------|---|-----------------------------|--------------------------|------|
| | First Name | Middle Name | Last Name | | | |
| 10. Within | 1 year before you filed | d for bankruptcy, w | as any of your property repossessed, foreclosed, gam | ished, attached, seized, or | levied? | |
| 2 | nat apply and fill in the o | details below. | | | | |
| - | to to line 11. | 23. 4 000244 | | | | |
| ☐Yes. F | Fill in the information be | elow. | | | | 202 |
| | | | Describe the property | Date | Value of the property | |
| Creditor's | News | | | | | |
| Creditors | Name | | | | | |
| Number | Street | | Explain what happened | | | |
| | | | Property was repossessed. | | | |
| | | | Property was foreclosed. | | | |
| - | | | Property was garnished. | | | |
| City | Sta | te ZIP Code | Property was attached, seized, or levied. | | | |
| ₩No | payment because you significantly significant significan | | | | | |
| | | | Describe the action the creditor took | Date action was taken | Amount | |
| Creditor's | Name | | | | | H |
| Number | Street | | | | | |
| City | State | e ZIP Code | Last 4 digits of account number: XXXX | | | |
| Annella de La | | | | | | |
| | | | as any of your property in the possession of an assig | nee for the benefit of cred | itors, a court-appointed | |
| | custodian, or anothe | r official? | | | | |
| √ No | | | | | | |
| Yes | | | | | | |
| | | | | | | |
| art 5: L | ist Certain Gifts | and Contribution | ons | | | |
| 10 Mishin | O | ad fan hankwinter. | did you give any gifte with a total value of more than C | 600 | | |
| I3. Within : | 2 years before you file | ed for bankruptcy, (| did you give any gifts with a total value of more than \$ | buu per person? | | |
| | | II - 100 | | | | |
| ☐Yes. F | Fill in the details for ea | ich gift. | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| fficial Form | 107 | Sta | tement of Financial Affairs for Individuals Filing for B | ankruptcy | Ÿ | page |

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| Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Number Street City State ZiP Code Person's relationship to you 4. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? Si No Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that Describe what you contributed Date you contributed Value Charity's Name List Certain Losses 5. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambil Mo Yes. Fill in the details. | btor 1 | Dominic | | Caruso | Case number (if know | vn) |
|--|-------------------------|----------------------------|--|--|--|----------------------------|
| Person to Whom You Gave the Gift Number Street | | First Name | Middle Name | Last Name | | |
| within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? No Ves. Fill in the details for each gift or contribution. Gifts or contributions to charities that Describe what you contributed Contributed Date you contributed Date you contributed List Certain Losses Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambli No Ves. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your loss Value of property los how the loss occurred Include the amount that insurance has paid, List pending | | a total value of more tha | n \$600 per | Describe the gifts | | Value |
| Within 2 years before you filed for bankruptcy did you give any gifts or contributions with a total value of more than \$600 to any charity? No Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that Describe what you contributed Contributed Date you Contributed Name Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambli No Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your loss Value of property los now the loss occurred National Property you lost and Describe any insurance coverage for the loss Date of your loss Value of property los now the loss occurred | erson to W | nom You Gave the Gift | The second secon | | | |
| Within 2 years before you filed for bankruptcy did you give any gifts or contributions with a total value of more than \$600 to any charity? No Ves. Fill in the details for each gift or contribution. Gifts or contributions to charities that Describe what you contributed Date you contributed Value contributed Ity State ZIP Code Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambli in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your loss Value of property los lost only the fore you fold the amount that insurance has paid. Ust pending | lumber S | Street | Active control of the deleter of deleters of the control of the co | | | |
| within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? No Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that Describe what you contributed Date you contributed Date you contributed Date you contributed List Certain Losses Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambli No Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your loss Value of property los lost on the loss occurred Include the amount that insurance has paid. List pending | | | And Andrews | | | |
| Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? No Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that Describe what you contributed Contributed Contributed Charity's Name Rumber Street Street Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gamble Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss now the loss occurred Include the amount that insurance has paid, list pending | ity | State | ZIP Code | | | |
| ✓ No ☐ Yes. Fill in the details for each gift or contribution. ☐ Gifts or contributions to charities that Describe what you contributed Contributed ☐ Date you Contributed ☐ Charity's Name ☐ Charity's Name ☐ Date of your loss Value of property los how the loss occurred ☐ Date of your loss Value of property los include the amount that insurance has paid. List pending | 'erson's rela | tionship to you | | | | |
| ✓ No ☐ Yes. Fill in the details for each gift or contribution. ☐ Gifts or contributions to charities that Describe what you contributed Contributed ☐ Date you Contributed ☐ Charity's Name ☐ Charity's Name ☐ Date of your loss Value of property los how the loss occurred ☐ Date of your loss Value of property los include the amount that insurance has paid. List pending | | | | | | |
| Gifts or contributions to charities that total more than \$600 Charity's Name Charity's Name | | ears before you filed for | bankruptcy, d | d you give any gifts or contributions wit | th a total value of more than \$600 to a | ny charity? |
| Gifts or contributions to charities that total more than \$600 Charity's Name Charity's Name | | | | | | |
| total more than \$600 Charity's Name Charity | o Contractor Contractor | | 3/19/19/19/19/19 | | | |
| Jumber Street List Certain Losses Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambli No Yes. Fill in the details. Describe the property you lost and how the loss occurred Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending | | | that Describ | e what you contributed | | Value |
| Alumber Street State ZIP Code **Title Certain Losses Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambli No Yes. Fill in the details. Describe the property you lost and how the loss occurred Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending | | | | | | |
| State ZIP Code **List Certain Losses Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gamble No Yes. Fill in the details. Describe the property you lost and how the loss occurred Describe any insurance coverage for the loss Date of your loss Value of property los Include the amount that insurance has paid. List pending | Charity's Nam | e | | | | 8 |
| State ZIP Code **List Certain Losses Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gamble No Yes. Fill in the details. Describe the property you lost and how the loss occurred Describe any insurance coverage for the loss Date of your loss Value of property los Include the amount that insurance has paid. List pending | | | | | | |
| State ZIP Code **List Certain Losses Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gamble No Yes. Fill in the details. Describe the property you lost and how the loss occurred Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending | | | | | | |
| Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambli No Yes. Fill in the details. Describe the property you lost and how the loss occurred Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending | lumber S | itreet | | | | |
| Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambli No Yes. Fill in the details. Describe the property you lost and how the loss occurred Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending | Nin. | Ctata ZID Ca | - | | | |
| Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambli No Yes. Fill in the details. Describe the property you lost and how the loss occurred Describe amount that insurance has paid. List pending | ity | State ZIP Co | de | | | |
| Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambli ✓ No ☐ Yes. Fill in the details. Describe the property you lost and how the loss occurred ☐ Describe amount that insurance has paid. List pending | | | | | | |
| ✓ No ☐ Yes. Fill in the details. ☐ Describe the property you lost and how the loss occurred ☐ Describe any insurance coverage for the loss ☐ Date of your loss ☐ Date of your loss ☐ List pending ☐ Describe any insurance has paid. List pending | t 6: List | Certain Losses | | | | |
| ✓ No ☐ Yes. Fill in the details. ☐ Describe the property you lost and how the loss occurred ☐ Describe any insurance coverage for the loss ☐ Date of your loss ☐ Date of your loss ☐ List pending ☐ Describe any insurance has paid. List pending | Within 1 ye | ear before you filed for b | ankruptcy or | since you filed for bankruptcy, did you lo | se anything because of theft, fire, oth | ner disaster, or gambling? |
| Describe the property you lost and how the loss occurred Describe any insurance coverage for the loss Date of your loss Value of property loss Include the amount that insurance has paid. List pending | | * 0 | | | | |
| how the loss occurred Include the amount that insurance has paid. List pending | Yes. Fill i | n the details. | | | | |
| include the amount that insurance has paid. List pending | | | | | | Value of property lost |
| | now the loa | is occurred | Include the insurance | amount that insurance has paid. List pend claims on line 33 of Schedule A/B: Proper | ting ty. | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 6

Official Form 107

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| | Dominic | | Caruso | Case number (if kno | own) |
|-------------------|---------------------------------------|-----------------|---|---|--|
| _ | First Name | Middle | Name Last Name | | |
| 7: Li | ist Certain Pay | ments or 1 | ransfers | | |
| ing bar | nkruptcy or prepar | ing a bankru | uptcy, did you or anyone else acting on your behalf pay or ptcy petition? eparers, or credit counseling agencies for services required in | | yone you consulted about |
| | allomeys, bankrupt | cy petition pri | sparers, or credit counseling agencies for services required in | i your barikrupicy. | |
| √ No | | | | | |
| Yes. F | ill in the details. | | | | |
| | | | Description and value of any property transferred | Date payment or transfer was made | Amount of payment |
| Person W | ho Was Paid | | | uansier was mode | |
| | | | | | |
| lumber | Street | | | | |
| | | | | | |
| | | | | | |
| City | State | ZIP Code | | name agraphic de la constante | |
| | - L-14 JJ | | | indichi di murappo | |
| mail or w | vebsite address | | | | |
| Person Wi | ho Made the Paymer | nt, if Not You | 1 | | |
| | | | | | |
| M No D∨es F | ill in the details. | | | | |
| | | | Description and refractions are transferred | | |
| | | | Description and value of any property transferred | Date payment or transfer was made | Amount of payment |
| erson W | ho Was Paid | | | | |
| | | | | | ************************************** |
| Number | Street | | | | (2) |
| | | | | | |
| | | | | | |
| City | State | ZIP Code | | | |
| ,, | Olulo | 211 0000 | | | |
| | | | | | |
| Within 2 | years before you furse of your busine | filed for bank | ruptcy, did you sell, trade, or otherwise transfer any prope | erty to anyone, other than pr | operty transferred in the |
| | | | made as security (such as the granting of a security interest | or mortgage on your property | <i>'</i>). |
| not inclu | de gifts and transfer | s that you ha | ve already listed on this statement. | | |
| No | | | | | |
| Yes. F | ill in the details. | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

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| | Dominic | | Caruso | | Case number (if known) _ | |
|--|---|------------|--|--|--|---|
| | First Name | Middle | Name Last Name | | | |
| | | | Description and value of property transferred | Describe any prope or debts paid in ex | erty or payments received change | Date transfer was made |
| Person Who I | Received Transfe | r | | | | |
| Number S | Street | | | CONTROL TO THE PARTY OF THE PAR | | |
| City | | ZIP Code | | | | |
| Person's rela | ationship to you _ | | | | | |
| √ 1No | set-protection de | | Description and value of the proper | hy transferred | | Date transfer was |
| | | | Description and value of the proper | ly transferred | | made made |
| | | | | | TOTAL PROPERTY OF THE PROPERTY OF | |
| Name of trus | st | | | | | |
| | | | unts, Instruments, Safe Depo: | sit Boxes, and Storag | ge Units | |
| rt 8: List Within 1 ye insferred? clude checkin operatives, a | Certain Fina ear before you fil ng, savings, mone associations, and | ncial Acco | uptcy, were any financial accounts or other financial accounts; certificates of o | nstruments held in your n | name, or for your benefit, cl | |
| rt 8: List Within 1 ye ansferred? clude checkin operatives, a | Certain Fina ear before you fil ng, savings, mone associations, and | ncial Acco | uptcy, were any financial accounts or other financial accounts; certificates of o | nstruments held in your n | name, or for your benefit, cl | s, pension funds, |
| rt 8: List . Within 1 ye ansferred? clude checkin operatives, a ☑ No □ Yes. Fill in | Certain Fina ear before you fil ng, savings, mone associations, and | ncial Acco | uptcy, were any financial accounts or other financial accounts; certificates of cal institutions. | nstruments held in your neposit; shares in banks, creating the shares in banks and the shares in banks, creating the shares in | pate account was closed, sold, moved, or | s, pension funds, Last balance before closing or |
| nt 8: List D. Within 1 ye ansferred? Clude checkin operatives, a No Yes. Fill in | Certain Fina ear before you file ng, savings, mone associations, and n the details. | ncial Acco | uptcy, were any financial accounts or other financial accounts; certificates of cal institutions. Last 4 digits of account number | nstruments held in your neposit; shares in banks, cree Type of account or instrument Checking Savings Money market Brokerage | pate account was closed, sold, moved, or | s, pension funds, Last balance before closing or |
| D. Within 1 ye ansferred? clude checkin poperatives, a | Certain Fina ear before you fileng, savings, mone associations, and in the details. | ncial Acco | uptcy, were any financial accounts or other financial accounts; certificates of cal institutions. Last 4 digits of account number | nstruments held in your neposit; shares in banks, cree Type of account or instrument Checking Savings Money market | pate account was closed, sold, moved, or | s, pension funds, Last balance before closing or |

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| ebtor 1 | Dominic | Caruso | Case number (if k | (nown) |
|---|----------------------------|---|--|---|
| | First Name | Middle Name Last Name | | |
| 21. Do you valuables? | | re within 1 year before you filed for bankruptcy, any | safe deposit box or other depository for | or securities, cash, or other |
| √ No | | | | |
| ☐Yes. F | Fill in the details. | | | |
| | | Who else had access to it? | Describe the contents | Do you still have |
| | | | | it? |
| Name of I | Financial Institution | Name | | □No |
| Name of t | mancial institution | Nume | | Yes |
| Number | Street | Number Street | | |
| | | City State ZIP Code | | |
| City | State ZIP C | code | | AND |
| | | | | |
| | ou stored property in a st | orage unit or place other than your home within 1 y | ear before you filed for bankruptcy? | |
| √ No | | | | |
| Yes. I | Fill in the details. | | | |
| | | Who else has or had access to it? | Describe the contents | Do you still have it? |
| | | | | □No |
| Name of | Storage Facility | Name | | ☐Yes |
| Number | Street | Number Street | | |
| | | City State ZIP Code | | |
| City | State ZIP C | code | | |
| | | | | |
| Part 9: I | dentify Property You | Hold or Control for Someone Else | | |
| 22 Daylou | hold or control one prop | orby that company also sump? Include any meaning | | hald in touch for a many |
| 2 3. 2 0 you √ 1 No | note of control any prop | erty that someone else owns? Include any property | y you borrowed from, are storing for, or | note in trust for someone. |
| | Fill in the details. | | | |
| | in in the detaile. | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| Waial Farr | 107 | Cotomont of Figure in I Affaire for the dis- | iduals Filing for Parlements | |
| fficial Form | 107 | Statement of Financial Affairs for Indiv | iduals rilling for bankruptcy | page 9 |

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| | First Name | Middle Name | Caruso Last Name | Case number (if kno | own) |
|---|--|------------------------------|------------------------------|---|---|
| | First Name | MARK STREET | s the property? | Describe the property | Value |
| | | | | | |
| Owner's Nar | me | Number | Street | | |
| Number | Street | | | | |
| | | City | State ZIP Co | de | |
| City | State ZIP C | ode | | | 000000000000000000000000000000000000000 |
| | | | | | |
| t 10: Gi | ive Details About E | nvironmental l | nformation | | |
| r the purpo | ose of Part 10, the follo | wing definitions a | oply: | | |
| Environm or materia | nental law means any fed al into the air, land, soil, s | deral, state, or local | statute or regulation concer | ning pollution, contamination, releases of hazardo including statutes or regulations controlling the cle | |
| Site mean | or material. ns any location, facility, or disposal sites. | r property as defined | d under any environmental | aw, whether you now own, operate, or utilize it or u | used to own, operate, or utilize it |
| Hazardou | 0 0 | ing an environmenta | al law defines as a hazardou | us waste, hazardous substance, toxic substance, h | nazardous material, pollutant, |
| | | ceedings that you | know about, regardless of | when they occurred. | |
| . Has any g | governmental unit notifi | ied you that you m | ay be liable or potentially | liable under or in violation of an environmental | law? |
| √No | | | | | |
| Yes. Fill | in the details. | | | | |
| | | | | Environmental law, if you know it | |
| | | Governm | nental unit | Christian and, it you know it | Date of notice |
| Name of site | 1 | Governmen | | - | Date of notice |
| Port of the State | | Governmer | ntal unit | - | Date of notice |
| | Street | | | | Date of notice |
| | | Governmer | ntal unit | | Date of notice |
| Number | | Governmer Number City | atal unit Street | | Date of notice |
| Number | Street | Governmer Number City | atal unit Street | | Date of notice |
| Number | Street State ZIP Co | Governmer Number City ode | Street State ZIP Code | | Date of notice |
| Number City . Have you | Street State ZIP Co | Governmer Number City ode | atal unit Street | | Date of notice |
| Number City . Have you . No | Street State ZIP Co | Governmer Number City ode | Street State ZIP Code | | Date of notice |
| Number City . Have you . No | State ZIP Co | Governmer Number City ode | Street State ZIP Code | | Date of notice |
| Number City . Have you | State ZIP Co | Governmer Number City ode | Street State ZIP Code | | Date of notice |
| Number City . Have you . No | State ZIP Co | Governmer Number City ode | Street State ZIP Code | | Date of notice |
| City i. Have you ☑ No | State ZIP Co | Governmer Number City ode | Street State ZIP Code | | Date of notice |

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| | Dominic | Caruso | Case number (if known | own) |
|---|--|--|--|---|
| | First Name Middle | Name Last Name | | |
| | | Governmental unit | Environmental law, if you know it | Date of notice |
| | | | | |
| Name of site | | Governmental unit | | |
| Number St | itreet | Number Street | | and reference of the contract |
| | | City State ZIP Code | | |
| City | State ZIP Code | - | | |
| . Have you b | een a party in any judicial or | administrative proceeding under any | environmental law? Include settlements and o | rders. |
| √ No | | | | |
| Yes. Fill in | n the details. | | | |
| | | Court or agency | Nature of the case | Status of the case |
| | | | | |
| Case title | | O | | Pending |
| | | Court Name | | ☐On appeal |
| | | | 1 | ☐ Concluded |
| | | Number Street | | Concluded |
| | | Number Street | | Concluded |
| Case number | , | Number Street City State ZIP Code | | Concluded |
| rt 11: Giv . Within 4 ye . A sol . A me | ears before you filed for bank ble proprietor or self-employed ember of a limited liability com | City State ZIP Code Business or Connections to Any cruptcy, did you own a business or have in a trade, profession, or other activity, expany (LLC) or limited liability partnership | e any of the following connections to any busi | |
| rt 11: Giv . Within 4 ye . A sol . A me . A pa . An o | ve Details About Your Bears before you filed for bank ole proprietor or self-employed ember of a limited liability compartner in a partnership | City State ZIP Code Business or Connections to Any Business or Line State | e any of the following connections to any busi | |
| rt 11: Giv . Within 4 ye . A sol . A ne . A pa . A no | ears before you filed for bank ole proprietor or self-employed ember of a limited liability com- artner in a partnership officer, director, or managing ex- | City State ZIP Code Susiness or Connections to Any struptcy, did you own a business or have in a trade, profession, or other activity, expany (LLC) or limited liability partnership executive of a corporation ing or equity securities of a corporation | e any of the following connections to any busi | |
| Tt 11: Giv . Within 4 ye . A sol . A pa . An o . I an o | ears before you filed for bank ole proprietor or self-employed ember of a limited liability com- artner in a partnership officer, director, or managing ex- owner of at least 5% of the voti | City State ZIP Code Business or Connections to Any Business or Connections or a corporation Business or Connections Business or Connections to Any Business or Connections Business or Connection | e any of the following connections to any busi | |
| Tt 11: Giv . Within 4 ye . A sol . A pa . An o . I an o | ears before you filed for bank ole proprietor or self-employed ember of a limited liability com- artner in a partnership officer, director, or managing ex- owner of at least 5% of the voti | City State ZIP Code Susiness or Connections to Any struptcy, did you own a business or have in a trade, profession, or other activity, expany (LLC) or limited liability partnership executive of a corporation and or equity securities of a corporation art 12. In the details below for each business. | e any of the following connections to any busi ither full-time or part-time | ness? |
| Tt 11: Giv Within 4 ye A sol A pa M An o No. None | ears before you filed for bank ole proprietor or self-employed ember of a limited liability com- artner in a partnership officer, director, or managing ex- owner of at least 5% of the voti | City State ZIP Code Susiness or Connections to Any Gruptcy, did you own a business or have in a trade, profession, or other activity, expany (LLC) or limited liability partnership executive of a corporation and or equity securities of a corporation art 12. In the details below for each business. Describe the nature of the business. | e any of the following connections to any busi ither full-time or part-time | ness? |
| Tt 11: Giv . Within 4 ye . A sol . A pa . A pa . A no . | ears before you filed for bank ole proprietor or self-employed ember of a limited liability com- artner in a partnership officer, director, or managing ex- owner of at least 5% of the voti e of the above applies. Go to Pack ck all that apply above and fill in | City State ZIP Code Susiness or Connections to Any struptcy, did you own a business or have in a trade, profession, or other activity, expany (LLC) or limited liability partnership executive of a corporation and or equity securities of a corporation art 12. In the details below for each business. | e any of the following connections to any busi ither full-time or part-time o (LLP) Employer Identification n | ness? umber surity number or ITIN. |
| Tt 11: Giv . Within 4 ye . A sol . A pa . A pa . A no . | per Details About Your Bears before you filed for bank ole proprietor or self-employed ember of a limited liability compartner in a partnership officer, director, or managing expower of at least 5% of the votice of the above applies. Go to Pack all that apply above and fill intestments, Inc. | City State ZIP Code Susiness or Connections to Any Gruptcy, did you own a business or have in a trade, profession, or other activity, expany (LLC) or limited liability partnership executive of a corporation and or equity securities of a corporation art 12. In the details below for each business. Describe the nature of the business. | e any of the following connections to any busing the full-time or part-time o (LLP) Employer Identification in Do not include Social Sections. | ness? umber surity number or ITIN. |

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| ebtor 1 | Dominic | | Caruso | Case number (if known) |
|------------------------|-----------------------------------|------------------------------|--|---|
| | First Name | Middle Name | Last Name | Substitution (II NIOWII) |
| 28. Within or other pa | 2 years before you filed | for bankruptcy, did y | ou give a financial statement | to anyone about your business? Include all financial institutions, creditors, |
| ☑ No | | | | |
| Yes. F | Fill in the details below. | | | |
| | | Date issu | ed | |
| Name | | MM/DD/Y | YYY | |
| Number | Street | | | |
| | | | | |
| City | State ZIP | Code | the company and the second | |
| have read | | | | and I declare under penalty of perjury that the answers are true and g money or property by fraud in connection with a bankruptcy case C. §§ 152, 1341, 1519, and 3571. |
| Х_ | Adduty ature of Dominic Caruso | £ | XSignature of | |
| Date | 04/15/2019 | | Date | |
| olid you atta | ach additional pages to | your <i>Statement of Fir</i> | ancial Affairs for Individuals | s Filing for Bankruptcy (Official Form 107)? |
| | or agree to pay someo | ne who is not an attor | ney to help you fill out bankr | uptcy forms? |
| ☑ No | | | | |
| Yes. Na | ame of person | | and the second s | Attach the Bankruptcy Petition Preparer's Notice, ———————————————————————————————————— |

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| Fill in this information t | to identify your case: | | | |
|----------------------------|------------------------|-------------|-------------------------------|--|
| Debtor 1 | Dominic | | Caruso | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | |
| United States Bankru | ptcy Court for the: | Ce | entral District of California | |
| Case number | | | | |
| (if known) | | | | |

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- m creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

| | • | | D), fill in the information below |
|--|--|---|---|
| Identify the cred | ditor and the property that is collateral | What do you intend to do with the property that secures a debt? | Did you claim the property a exempt on Schedule C? |
| Creditor's name: | Toyota Financial Services | ☐ Surrender the property. ☐ Retain the property and redeem it. | ☑ No □ Yes |
| Description of property securing debt: | 2007 GX Lexus 470 | Retain the property and enter into a Reaffirmation Agreement. | |
| securing debt. | | ☐ Retain the property and [explain]: | |
| Creditor's | | ☐ Surrender the property. | √ No |
| name: | Mr. Cooper | Retain the property and redeem it. | ☐ Yes |
| Description of property securing debt: | Single Family Home 18771 Flagstaff Lane Huntington Beach, CA 92646 | ✓ Retain the property and enter into a Reaffirmation Agreement. ☐ Retain the property and [explain]: | |

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Caruso Caruso Case number (if known) _______

| Creditor's name: Description of property securing debt: | Real Time Resolutions Single Family Home 18771 Flagstaff Lane Huntington Beach, CA 92646 | ☐ Surrender the property. ☐ Retain the property and redeem it. ☑ Retain the property and enter into a Reaffirmation Agreement. ☐ Retain the property and [explain]: | ⊠ No □ Yes | |
|---|--|--|----------------------|---|
| Creditor's name: Description of property | Internal Revenue Service Single Family Home 18771 Flagstaff Lane Huntington Beach, CA | ☐ Surrender the property. ☐ Retain the property and redeem it. ☑ Retain the property and enter into a Reaffirmation Agreement. | ⊠ No ☐ Yes | |
| securing debt: | 92646 | Retain the property and [explain]: | | |
| Creditor's | | ☐ Surrender the property. | ∑ No | *************************************** |
| name: | Franchise Tax Board | Retain the property and redeem it. | ☐ Yes | |
| Description of property securing debt: | | Retain the property and enter into a Reaffirmation Agreement. | | |
| Scooning debt. | • | Retain the property and [explain]: | | |

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Debtor 1

Dominic First Name Middle Name Last Name Page 54 of 59

Case number (if known)

| Part 2: | List | Your | Unexpired | Personal | Property | Leases |
|------------|------|------|------------|-----------|-----------|--------|
| التعالفانا | -136 | ·oui | Olicapiica | . c.somai | ···operty | LCUSCS |

For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

| Describe your unexpired personal property leases | | Will the lease be assumed? |
|---|--|---|
| Lessor's name: | | ☐ No |
| Description of leased property: | | Yes |
| Lessor's name: | | ☐ No |
| Description of leased property: | | Yes |
| Lessor's name: | | ☐ No |
| Description of leased property: | | Yes |
| Lessor's name: | | □ No |
| Description of leased property: | | ☐ Yes |
| Lessor's name: | | ☐ No |
| Description of leased property: | | Yes |
| Lessor's name: | A CONTRACTOR OF THE PROPERTY O | □ No |
| Description of leased property: | | Yes |
| Lessor's name: | | ☐ No |
| Description of leased property: | | Yes |
| ırt 3: Sign Below | | |
| Under penalty of perjury, I declare that I have indicat s subject to an unexpired lease. | ted my intention about any property of my estate that | secures a debt and any personal property that |
| | X | |
| Signature of Debtor 1 | Signature of Debtor 2 | |
| Date 04/15/2019 | Date | |
| MM/ DD/ YYYY | MM/ DD/ YYYY | |

| | | oc 1 Filed 04 ain Document | | Ente | ered 04/15/1 | 9 21:46:21 | Desc |
|---------------------|---|---|------------------------------------|--------------------------|--|--|-----------------------------------|
| Fill | I in this information to identify your case: | am Documem | Fay | E 33 (| Check one box | only as directed in this | form and in Form |
| | | _ | | | 122A-1Supp: | | |
| D | Pebtor 1 Dominic First Name Middle Name | Caruso Last Name | | | 1. There is n | o presumption of abuse | э. |
| D | ebtor 2 | | | | 2. The calcu | lation to determine if a | presumption of |
| (5 | Spouse, if filing) First Name Middle Name | Last Name | | | | es will be made under <i>C</i> ation (Official Form 122 | |
| U | nited States Bankruptcy Court for the: | Central District of Cali | ifornia | | rest Calcula | anon (Official Form 122 | .A-2). |
| | ase number | | | | and the second of the second o | ns Test does not apply n itary service but it could | |
| <u></u> | fficial Form 122A-1 | | | | ☐ Check if this | s is an amended filing | |
| | | | | - | | | |
| C | hapter 7 Statement of Your | Current M | lonthly | / Inco | ome | | 12/15 |
| sep nun milit | as complete and accurate as possible. If two married pecarate sheet to this form. Include the line number to which the line number to which the line number to which the line has been seen that you are exempted from the service, complete and file Statement of Exemption for the line of the line | h the additional inform m a presumption of ab from Presumption of A | nation applies use because | s. On the t you do no | op of any additional ot have primarily co | l pages, write your na nsumer debts or beca | me and case ause of qualifying |
| 1. | What is your marital and filing status? Check one only. | | | | | | |
| | ✓ Not married. Fill out Column A, lines 2-11. | | | | | | |
| | ☐ Married and your spouse is filing with you. Fill out bo | oth Columns A and B, lin | nes 2-11. | | | | |
| | ☐ Married and your spouse is NOT filing with you. You | and your spouse are: | | | | | |
| | \square Living in the same household and are not legal | ly separated. Fill out be | oth Column A | and B, line | es 2-11. | | |
| | Living separately or are legally separated. Fill outpenalty of perjury that you and your spouse are leapart for reasons that do not include evading the | gally separated under no | onbankruptcy | law that ap | oplies or that you and | | |
| | Fill in the average monthly income that you received 101(10A). For example, if you are filing on September 15 during the 6 months, add the income for all 6 months and both spouses own the same rental property, put the income | 5, the 6-month period wo d divide the total by 6. F | ould be March ill in the result | 1 through . Do not in | August 31. If the am | ount of your monthly in nount more than once. I | come varied For example, if |
| | | | | | Column A Debtor 1 | Column B Debtor 2 or non-filing spouse | |
| 2. | Your gross wages, salary, tips, bonuses, overtime, and payroll deductions). | commissions (before a | all | - | \$0.00 | | _ |
| 3. | Alimony and maintenance payments if Column B is fille spouse. | ed in. Do not include pa | yments from a | ı _ | \$0.00 | (************************************** | <u>-</u> |
| 4. | All amounts from any source which are regularly paid for dependents, including child support. Include regular can unmarried partner, members of your household, your definctude regular contributions from a spouse only if Columpayments you listed on line 3. | ontributions from ependents, parents, and | roommates. | our - | \$0.00 | | _ |
| 5. | Net income from operating a business, profession, or farm | Debtor 1 | Debtor 2 | | | | |
| | Gross receipts (before all deductions) | \$2,500.00 | 1 | | | | |
| | Ordinary and necessary operating expenses | - \$0.00 - | | 1 | | | |
| | Net monthly income from a business, profession, or farm | \$2,500.00 | | Copy here → _ | \$2,500.00 | - | - |
| 6. | Net income from rental and other real property | Debtor 1 | Debtor 2 | | | | |
| | Gross receipts (before all deductions) | \$0.00 | | | | | |
| | Ordinary and necessary operating expenses | - \$0.00 - | |] | | | |
| | Net monthly income from rental or other real property | \$0.00 | | Copy here → - | \$0.00 | ¥ | = |

7. Interest, dividends, and royalties

\$0.00

Case 8:19-bk-11384-TA Doc 1 Filed 04/15/19 Entered 04/15/19 21:46:21 Main Document Page 56 of 59 Debtor 1 Dominic Case number (if known) First Name Middle Name Last Name Column A Column B Debtor 1 Debtor 2 or non-filing spouse 8. Unemployment compensation \$0.00 Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: \$0.00 For your spouse..... 9. Pension or retirement income. Do not include any amount received that was a benefit \$0.00 under the Social Security Act. 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below. Total amounts from separate pages, if any. 11. Calculate your total current monthly income. Add lines 2 through 10 for each \$2,500.00 \$2,500.00 column. Then add the total for Column A to the total for Column B. Total current monthly income Determine Whether the Means Test Applies to You 12. Calculate your current monthly income for the year. Follow these steps: 12a. Copy your total current monthly income from line 11..... Copy line 11 here \$2,500.00 Multiply by 12 (the number of months in a year). x 12 12b. The result is your annual income for this part of the form. \$30,000.00 12b 13. Calculate the median family income that applies to you. Follow these steps: Fill in the state in which you live. California Fill in the number of people in your household. Fill in the median family income for your state and size of household...... \$57,962.00 To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. 14. How do the lines compare? 14a. Line 12b is less than or equal to line 13. On the top of page 1, check box 1, There is no presumption of abuse. Go to Part 3. 14b. Line 12b is more than line 13. On the top of page 1, check box 2, The presumption of abuse is determined by Form 122A-2. Go to Part 3 and fill out Form 122A-2. Part 3: Sign Below By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct. Signature of Debtor 1 Signature of Debtor 2 Date 04/15/2019 MM/DD/YYYY MM/DD/YYYY If you checked line 14a, do NOT fill out or file Form 122A-2. If you checked line 14b, fill out Form 122A-2 and file it with this form.

Main Document

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B2030 (Form 2030)(12/15)

United States Bankruptcy Court Central District of California

| ln | re | | | | |
|----|---|--|--------------------|-----------------|--------------------|
| Са | aruso, Dominic | | Case No | | |
| De | ebtor(s) | | Chapter | 7 | _ |
| | DIS | CLOSURE OF COMPENSATION OF ATTORNE | Y FOR DEBTOR | ₹ | |
| 1. | compensation paid to me with | a) and Fed. Bankr. P. 2016(b), I certify that I am the a nin one year before the filing of the petition in bankro behalf of the debtor(s) in contemplation of or in conn | uptcy, or agreed | I to be paid to | o me, for services |
| | For legal services, I hav | re agreed to accept | \$ | 1,500.00 | |
| | Prior to the filing of this | statement I have received | | \$0.00 | |
| | Balance Due | | \$ | 1,500.00 | |
| 2. | The source of the compensation | on to be paid to me was: | | | |
| | ✓ Debtor | Other (specify) | | | |
| 3. | The source of compensation to | o be paid to me is: | | | |
| | ₫ Debtor | Other (specify) | | | |
| 4. | I have not agreed to share of my law firm. | e the above-disclosed compensation with any other p | erson unless the | ey are membe | ers and associates |
| | | e above-disclosed compensation with another person agreement, together with a list of the names of the pe | | | |
| 5. | | sed fee, I have agreed to render legal service for all a | • | | |
| | a. Analysis of the debtor sbankruptcy; | financial situation, and rendering advice to the deb | otor in determinii | ng whether to | file a petition in |
| | , | any petition, schedules, statements of affairs and plar otor at the meeting of creditors and confirmation heari | • | • | as thereof: |
| _ | • | - | | | ,, |
| 6. | by agreement with the debtort | (s), the above-disclosed fee does not include the follo | owing services. | | |
| | | | | | |
| | | CERTIFICATION | | | |
| | | t the foregoing is a complete statement of any agree of for representation of the debtor(s) in this bankrupto | | ment for | |
| | 04/15/2019 | /s/ Anerio Ventura Altman, Esc | ٦. | | |
| | Date | Signature of Attorney | | | |
| | | Lake Forest Bankruptcy | | | |

Name of law firm

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| Attorney or Party Name, Address, Phone & Fax Nos., State Bar No. & Email | FOR COURT USE ONLY |
|---|--|
| Lake Forest Bankruptcy | |
| Lake Forest Bankruptcy | |
| Po Box 515381 Los Angeles, CA 90051-6681 | |
| Phone: (949) 218-2002 | |
| Anerio Ventura Altman, Esq. | |
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| Los Angeles, CA 90051-6681 | |
| Phone: (949) 218-2002 | |
| Email: avaesq@lakeforestbkoffice.com | |
| Debtor(s) appearing without an attorney | |
| Attorney for Debtor(s) | N. |
| United States | Bankruptcy Court |
| Central District of Cali | fornia - Santa Ana Division |
| In re: | CASE NO.: |
| Caruso, Dominic | |
| | CHAPTER: Chapter 7 |
| | |
| | |
| | VERIFICATION OF MASTER |
| | MAILING LIST OF CREDITORS |
| | [LBR 1007-1(a)] |
| | |
| | |
| | |
| | |
| Debtor(s |). |
| | |
| fursuant to LBR 1007-1(a), the Debtor, or the De | htor's attorney if applicable contition under a very |
| ursuant to LBR 1007-1(a), the Debtor, or the De erjury that the master mailing list of creditors fil | btor's attorney if applicable, certifies under penalty o |
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| | btor's attorney if applicable, certifies under penalty o |
| fursuant to LBR 1007-1(a), the Debtor, or the De erjury that the master mailing list of creditors fil heet(s) is complete, correct, and consistent with esponsibility for errors and omissions. | btor's attorney if applicable, certifies under penalty of a language of the Debtor's schedules and I/we assume all |
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Capital One PO Box 30285 Salt Lake City, UT 84130

Dell Financial Services LLC Po Box 81607 Austin, TX 78708

Franchise Tax Board PERSONAL BANKRUPTCY MS A340 PO BOX 942867 Sacramento, CA 94267

Internal Revenue Service Centralized Insolvency Operation Po Box 7346 Philadelphia, PA 19101-7346

Mr. Cooper Po Box 619098 Dallas, TX 75261-9098

Real Time Resolutions Attn: Bankruptcy PO Box 36655 Dallas, TX 75235-1655

Toyota Financial Services Po Box 9786 Cedar Rapids, IA 52409

Wells Fargo Bank Po Box 14517 Des Moines, IA 50306